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A Partnership Including
Professional Corporations
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Todd R. Wiener
Attorney at Law
twiener@mwe.com
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MCDERMOTT, WILL & EMERY

October 30, 2001

BY FEDERAL EXPRESS

Mr. Joe Dombrowski
Remedial Project Manager
Bureau of Land
Illinois Environmental Protection Agency
1021 N. Grand Avenue East, Box 19276
Springfield, Illinois 62794-9276

Re: Rexnord Corporation
Response to IEPA Request for Information
Downers Grove, Illinois Groundwater Investigation

Dear Mr. Dombrowski:

On behalf of Rexnord Corporation (hereinafter referred to as "Rexnord"), I am responding to the Illinois Environmental Protection Agency's ("IEPA") recent Request for Information (hereinafter referred to as the "Request") regarding the Downers Grove, Illinois Groundwater Investigation (hereinafter referred to as the "Site"). This response, and the attached answers to the information requests, are made without any acknowledgement that Rexnord is a responsible party under the Illinois Environmental Protection Act; without any admission of liability or responsibility under the Illinois Environmental Protection Act, CERCLA or any other statute; and without acknowledgement of the applicability of the authorities referenced in the Request. Furthermore, Rexnord does not admit or agree that any activities which have been, are now being, or will be conducted at the Site by the IEPA or its representatives are warranted or are authorized under the Illinois Environmental Protection Act or any other authority.

Without waiving any right to further object to the scope or basis for the Request and/or any specific requests for information or documents, based on our investigation, at no time has Rexnord, caused or contributed in any manner to the chlorinated groundwater contamination present at the Site. Rexnord started using chlorinated solvents in 1989, in minimal quantities, in a small totally enclosed vapor degreaser. Rexnord has never had a spill or release of any chlorinated solvents. We therefore request that Rexnord be removed from any list of responsible parties for this Site, and that Rexnord not be included on any such lists in the future.

Mr. Joe Dombrowski
Remedial Project Section
Bureau of Land
Illinois Environmental Protection Agency
October 30, 2001
Page 3

bcc: Irwin M. Shur, Esq. *(via fax w/ encl.)*
Aaron Hardt, Esq. *(via fax w/ encl.)*
Rudolph A. Fuys, Jr. *(via fax w/ encl.)*

**Rexnord Corporation's
Response to the Illinois Environmental Protection Agency
Environmental Protection Act Section 4(b) and (b) Information Request**

1. Identify all persons consulted in the preparation of the answers to these Information Requests.

ANSWER: Rexnord Corporation, located at 2400 Curtiss Street, Downers Grove, Illinois (the "Facility"), consulted with Rudolph A. Fuys, Jr., Plant Metallurgist and Environmental Affairs Manager, in connection with the responses to the Information Requests. Mr. Fuys' business address and telephone number are 2400 Curtiss Street, Downers Grove, Illinois 60515, and 630-719-2343, respectively. Mr. Fuys should be contacted through Rexnord Corporation's outside legal counsel, Mr. Todd R. Wiener, McDermott, Will & Emery, 227 West Monroe Street, Chicago, Illinois 60606, 312-984-7719.

2. Identify all documents consulted, examined, or referred to in the preparation of the answers to these Requests, and provide copies of all such documents.

ANSWER: Rexnord Corporation consulted and examined the documents compiled and produced in response to the State of Illinois Attorney General's February 14, 2001 Subpoena Duces Tecum in the case of People v. Lockformer, 01CH62, and the documents compiled and produced in response to Lockformer Company's April 4, 2001 and April 19, 2001 Subpoenas Duces Tecum in the case of People v. Lockformer, 01CH62 (collectively, "Prior Subpoenas"). Copies of these documents are provided in response to the Information Requests.

3. If you have reason to believe that there may be persons able to provide a more detailed or complete response to any Information Request or who maybe able to provide additional responsive documents, identify such persons.

RECEIVED
OCT 31 2001
IEP

ANSWER: There is no one with more detailed or complete information related to the Facility's use and disposal of chlorinated solvents.

4. Identify all persons having knowledge or information about the generation, transportation, treatment, disposal, or other handling of hazardous substances at the Facility by you, your contractors, or by prior owners and/operators.

ANSWER: Rudolph A. Fuys, Jr., Plant Metallurgist and Environmental Affairs Manager, has knowledge about the generation, transportation, treatment, disposal and handling of hazardous substances at the Facility by Rexnord Corporation and its contractors. See Answer # 1.

5. Describe the nature of your activities or business at the Facility, with respect to purchasing, receiving, processing, storing, treating, disposing or otherwise handling hazardous substances or materials at the Site.

ANSWER: As reflected in the March 15, 2001 letter from Todd Wiener to Michael C. Partee, as well as the documents provided in response to the Prior Subpoenas, all of which are provided hereto, Rexnord Corporation has never had a release of chlorinated solvents at the Facility. Rexnord Corporation's only use of chlorinated solvent consists of a small, totally enclosed vapor degreaser, purchased for the Facility in 1989. Rexnord Corporation used 1,1,1-trichloroethane in the degreaser from 1989 to mid-1993, and then used trichloroethylene in the degreaser from 1993 to the present. The enclosed documents reflect the small scale of the vapor degreaser. The enclosed documents demonstrate that the Facility purchases approximately four drums of solvent per year and recovers two drums per year of waste solvent, with the remaining two drums represented by permitted air emissions.

6. State the dates during which you owned, operated, or leased the Facility, and provide copies of all documents evidencing or relating to initiation of such ownership, operation, or lease arrangements (e.g., deeds, leases, etc.).

ANSWER: Rexnord Corporation and its predecessors have owned and operated the Facility at 2400 Curtiss Street, Downers Grove, Illinois since approximately 1957. Additional information regarding the owners and operators of the Facility should be available at the Office of the DuPage County, Recorder of Deeds.

7. Provide information about the physical conditions at the Facility, including but not limited to the following:

- a) Property boundaries, including a written legal description;
- b) Location of underground utilities (telephone, electrical, sewer, water main, etc.);
- c) Surface structures (e.g., buildings, tanks, etc.);
- d) Ground water wells, including drilling logs;
- e) Storm water drainage system, and sanitary sewer system, past and present, including septic tank(s), subsurface disposal field(s), and other underground structures; and where, when and how such systems are emptied;
- f) Any and all additions, demolitions, or changes of any kind on, under, or about the Facility, to its physical structures, or to the property itself (e.g., excavation work); and any planned additions, demolitions, or other changes to the Facility; and
- g) All maps and drawings of the Facility in your possession.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas, which includes information on the physical features of the property.

8. Identify all past and present solid waste management units (e.g., waste piles, landfills, surface impoundments, waste lagoons, waste ponds or pits, tars, container storage areas, etc.) at the Facility. For each such solid waste management unit identified, provide the following information:

- a) -A map showing the unit's boundaries and the location of all known solid waste units whether currently in operation or not. This map should be drawn to scale, if possible, and clearly indicate the location and size of all past and present units;
- b) The type of unit (e.g., storage area, landfill, waste pile, etc.), and the dimensions of the unit;
- c) The dates that the unit was in use;
- d) The purpose and past usage (e.g., storage, spill containment, etc.);
- e) The quantity and types of materials (hazardous substances and any other chemicals) located in each unit;
- f) Pollutants, or contaminants, and damages resulting therefrom.
- g) The construction (materials, composition), volume, size, dates of cleaning, and condition of each unit.
- h) If unit is no longer in use, how was such unit closed and what actions were taken to prevent or address potential or actual releases of waste constituents from the unit.

ANSWER: None.

9. Identify the prior owners of the Facility. For each prior owner, further identify:

- a) The dates of ownership;
- b) All evidence showing that they controlled access to the Facility; and
- c) All evidence that a hazardous substance, pollutant, or contaminant, was released or threatened to be released at the Facility during the period that they owned the Facility.

ANSWER: Rexnord Corporation and its predecessors have owned and operated the Facility since approximately 1957. Rexnord Corporation does not know of any evidence of a release or threatened release during any prior ownership of the Property.

10. Identify the prior operators, including lessors, of the Facility. For each such operator, further identify:

- a) The dates of operation;
- b) The nature of prior operations at the Facility;
- c) All evidence that they controlled access to the Facility; and
- d) All evidence that a hazardous substance, pollutant, or contaminant, was released or threatened to be released at or from the Facility and /or its solid waste units during the period that they were operating the Facility.

ANSWER: Rexnord Corporation does not have any such information or evidence.

11. Provide copies of all local, state, and federal environmental permits ever granted for the Facility or any part thereof (e.g., RCRA permits, NPDES permits, etc.).

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas, which include information on certain environmental permits granted to the Facility. Copies of Facility environmental permits can be obtained from the Illinois Environmental Protection Agency's own permit files and the Downers Grove Sanitary District.

12. Provide all reports, information, or data related to soil, water (ground and surface), or air quality and geology/hydrogeology at and about the Facility. Provide copies of all documents containing such data and information, including both past and current aerial photographs as well as documents containing analysis or interpretation of such data.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

13. After the time You acquired the Facility, is there evidence or reason to know that any hazardous substance, contaminants, pollutants or oil was disposed of on, at or adjacent to the Facility? Describe the basis of this knowledge. Describe all investigation of the Facility you undertook prior to acquiring the Facility and all of the facts on which you based the answer to this question.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

14. Describe all leaks, spills or releases or threats of releases of any kind into the environment of any hazardous materials that have occurred or may occur at or from the Facility, including but not limited to:
- a) When such releases occurred or may occur;
 - b) How the release occurred or may occur;
 - c) What hazardous materials were released or may be released;
 - d) What amount of each such hazardous material was so released;
 - e) Where such releases occurred or may occur;
 - f) Any and all, activities undertaken in response to, each such release or threatened release;
 - g) Any and all investigations of the circumstances, nature, extent or location of each such release or threatened release, including the results of any soil, water (ground and surface), or air testing that was undertaken; and
 - h) All persons with information relating to subparts a through g of this question.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

15. If the answer to question 14 is anything but an unqualified "no," and if any releases or threatened release identified in response to question 14 above occurred into any subsurface disposal system or floor drain inside or under your building or buildings at the Facility, identify;
- a) Where the disposal system or floor drains were located;
 - b) When the disposal system or floor drains were installed;
 - c) Whether the disposal system or floor drains were connected to pipes;
 - d) Where such pipes were located and emptied;

- d) When such pipes were installed;
- e) How and when such pipes were replaced, or repaired; and
- f) Whether such pipes ever leaked or in any way released hazardous materials into the environment.

ANSWER: None.

16. Did any leaks, spills, or releases of hazardous materials occur at the Facility when such materials were being:

- a) Delivered by vendor;
- b) Stored (e.g., in any tanks, drums, or barrels);
- c) Transported or transferred (e.g., to or from any tanks, drums, barrels, or recovery units); or
- d) Treated.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

17. If the answer to the preceding question is anything other than an unqualified "no", provide all documents relating to any such leaks, spills or releases.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

18. Has soil ever been excavated or removed from the Facility?

- a) Amount of soil excavated;
- b) Location of excavation;
- c) Manner and place of disposal and/or storage of excavated soil;
- d) Dates of soil excavation;

- e) Identity of persons who excavated or removed the soil;
- f) Reason for soil excavation;
- g) Whether the excavation or removed soil contained hazardous materials and why the soil contained such materials;
- h) All analyses or tests and results of analyses of the soil that was removed from the Facility;
- i) All persons, including contractors, with information about (a) through (h) of this request;
- j) All reports, summaries or, other documentation describing the excavation.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas.

19. Provide records from 1972 through the present showing how much chlorinated solvent/cleaner or other chlorinated materials were purchased for the Facility. Provide records from 1972 through the present, which show how much chlorinated solvent/cleaner or other chlorinated materials were sent from the Facility to be recycled or disposed. Provide the manifests showing such recycling or disposal.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas, which include all available documents and information related to Rexnord's use of chlorinated solvent in a small, totally enclosed, vapor degreaser and disposal of waste solvent from the degreaser since 1989. Copies of waste manifests for the chlorinated solvent are also enclosed.

20. Provide all records regarding the disposal of solid waste from the Facility from 1972 to present.

ANSWER: Enclosed are copies of the documents provided by Rexnord Corporation in response to the Prior Subpoenas, which include all available documents and information related to Rexnord's use of chlorinated solvent in a small, totally enclosed, vapor degreaser and disposal

of waste solvent from the degreaser since 1989. Copies of waste manifests for the chlorinated solvent are also enclosed. To the extent IEPA is requesting records beyond that requested in question 19, Rexnord Corporation requests that IEPA explain the relationship of the requested records to its investigation of chlorinated solvent groundwater contamination at the Site.

CHI99 3799494-1.054265.0017

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Attorney at Law
twiener@mwe.com
312-984-7719

MCDERMOTT, WILL & EMERY

March 15, 2001

**BY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Michael C. Partee
Assistant Attorney General
Environmental Bureau
188 West Randolph Street
Suite 2001
Chicago, Illinois 60601

Re: Response of Rexnord Corporation to Subpoena *Duces Tecum* Issued
In the Matter of People v. The Lockformer Company, Case No. 00 CH
62 (DuPage County)

Dear Mr. Partee:

Enclosed are the documents produced by Rexnord Corporation in response to the referenced subpoena *duces tecum*. The documents are bates numbered 1-133.

We understand from you that the Attorney General issued subpoenas to Rexnord and other companies identified by the defendant as potentially responsible parties for the groundwater contamination being addressed in the referenced litigation. We further understand that the defendant did not provide any basis for why they identified Rexnord as responsible for groundwater contamination in Lisle.

In fact, there is absolutely no basis for any allegation by Lockformer with regard to Rexnord. Rexnord, to its knowledge, has never had a release of chlorinated solvents from its Downers Grove facility. The only chlorinated solvent use at the facility consists of a small amount of solvent used in a small, totally enclosed vapor degreaser, purchased by the facility in 1989 for the purpose of cleaning partially assembled bearings. The facility used 1,1,1 trichloroethane in the degreaser from 1989 until mid-1993, and then has used trichloroethylene from 1993 until the present.

The following documents are enclosed:

- Uniform Hazardous Waste Manifests for waste trichloroethylene and waste 1,1,1 trichloroethane
- Laboratory analysis reports for characterization of waste trichloroethylene (records exist back to 1996)
- Trichloroethylene usage records kept pursuant to FESOP Permit I.D. No. 043030AAU
- Purchasing records for trichloroethylene (records date back to August 1994)
- Form GM-Generation and Management for trichloroethylene and 1,1,1, trichloroethane from the Annual Hazardous Waste Reports.

As the documents show, all waste chlorinated solvents from the small vapor degreaser were recovered or reclaimed by the various suppliers. The documents also evidence the small scale of the vapor degreaser operation. Please note that the total amount of chlorinated solvent purchased averages approximately four drums per year, while waste chlorinated solvent has averaged approximately two drums per year, with the balance of the material represented by permitted air emissions.

As the enclosed documents in this letter make clear, Rexnord does not have any connection to the environmental issues being addressed by the State of Illinois in the Lockformer litigation. Please call me if you have any further questions.

Sincerely yours,



Todd R. Wiener

TRW:ji
Enclosure

Michael C. Partee

March 15, 2001

Page 3

bcc: Irwin M. Shur, Esq. (Vice President and Division General Counsel)
Mr. Rudolph A. Fuys, Jr., Ph.D., CHMM
Robert E. Bouma, Esq.

UNIFORM HAZARDOUS WASTE MANIFEST I L D 0 0 5 4 5 5 5 7 1 00039

1. Generator's Name and Mailing Address
 Rexnord Corporation
 2400 Curtiss Street - Downers Grove, IL 60515
 Location: Downers Grove, IL
 PHONE # (630) 969-1770

2. Generator's US EPA ID No.
 I L D 0 0 5 4 5 5 5 7 1 00039

3. Manifest Document No.
 00039

4. 24-HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: (248) 799-3820

5. Transporter 1 Company Name
 Detrex Corporation
6. US EPA ID Number
 I L D 0 7 4 4 2 4 9 3 8

7. Transporter 2 Company Name
 Detrex Corporation
8. US EPA ID Number
 I L D 0 7 4 4 2 4 9 3 8

9. Designated Facility Name and Site Address
 Detrex Corporation
 2537 LeMoyné Avenue
 Melrose Park, IL 60160
10. US EPA ID Number
 I L D 0 7 4 4 2 4 9 3 8

A. Illinois Manifest Document Number
 IL 8741972

B. Generator's IL ID Number
 043030000

C. Transporter's ID Number
 0297

D. Transporter's Phone
 708/345-3806

E. Transporter's ID Number

F. Transporter's Phone

G. Facility's IL ID Number
 0311186000

H. Facility's Phone
 708/345-3806

| 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers | | 13. Total Quantity | 14. Unit M/Vol | Waste No |
|--|----------------|------|--------------------|----------------|--------------------------------|
| | No | Type | | | |
| a. RQ, Waste Trichloroethylene, 6.1, UN1710, PG III | 0.01 | DM | 00.055 | G | EPA HW Number F001 00024 |
| b. | | | | | EPA HW Number |
| c. | | | | | EPA HW Number |
| d. | | | | | EPA HW Number |

J. Additional Description for Materials Listed Above
 Additional Waste # D040
 Approval # 63195000

K. Handling Codes for Wastes Listed Above in Item #14

15. Special Handling Instructions and Additional Information
 ERG #160

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Dan Devans
 Signature: [Signature]
 Date: 02/14/00

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name: RICHARD FUENTES
 Signature: [Signature]
 Date: 02/14/00

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name:
 Signature:
 Date:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name: JULIE DERENGIOWSKI
 Signature: [Signature]
 Date: 02/14/00

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 and/or imprisonment up to 5 years. This form has been approved by the Forms Management Center.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **IL D 0 0 5 4 5 5 7 1** Manifest Document No. **85195**

2. Page 1 of 1 Information on the shaded areas required by Federal law but is required by Illinois law

3. Generator's Name and Mailing Address
Reynold Corporation
2400 Curtiss Street - Downers Grove, IL 60515
 Location if Different PHONE: (630) 969-1770

A. Illinois Manifest Document Number
IL 8785195

4. 24-HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: (248) 799-3820

B. Generator's IL ID Number **0 4 3 0 3 0 0 0 0**

5. Transporter 1 Company Name **Detrex Corporation** 6. US EPA ID Number **IL D 0 7 4 4 2 4 9 3 8**

C. Transporter's ID Number **0 2 9 7**

7. Transporter 2 Company Name 8. US EPA ID Number

D. Transporter's Phone: **708/345-3806**

9. Designated Facility Name and Site Address
Detrex Corporation
2537 LeMoyn Avenue
Melrose Park, IL 60160

10. US EPA ID Number **IL D 0 7 4 4 2 4 9 3 8**

E. Transporter's ID Number

F. Transporter's Phone ()

G. Facility's IL ID Number **0 3 1 1 8 6 0 0 0**

H. Facility's Phone (**708/345-3806**

| G E N E R A T O R | 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers | | 13. Total Quantity | 14. Unit Wt/Vol | 15. Waste No |
|---|--|----------------|------|--------------------|-----------------|--------------------------------|
| | | No. | Type | | | |
| a. | RQ, Waste Trichloroethylene, 6.1, UN1710, PG III | 0.01 | DM | 00015 | G | EPA HW Number F001 D040 |
| b. | | | | | | EPA HW Number |
| c. | | | | | | EPA HW Number |
| d. | | | | | | EPA HW Number |

J. Additional Description for Materials Listed Above
Approval # 63195000

K. Handling Codes for Wastes Listed Above in Item #14

15. Special Handling Instructions and Additional Information
ERG #160

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
 If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **MARTIN Jimmy** Signature *[Signature]* Date **09070**

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name **RICHARD FUENTES** Signature *[Signature]* Date **09070**

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name Signature Date

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name **JULIE BERENKOWSKI** Signature *[Signature]* Date **09070**

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1989, Chapter 111 §2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

UNIFORM HAZARDOUS WASTE MANIFEST
Generator's US EPA ID No: I L D 0 0 5 4 5 5 5 7 1 | Manifest Document No: 0 0 0 3 9

Generator's Name and Mailing Address: Rexnord Corporation, 2400 Curtiss St. - Downers Grove, IL 60515
Location: Different Phone: (630) 969-1770
A. Illinois Manifest Document Number: IL 8665014

24-HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: (248) 799-3820
B. Generator's IL ID Number: 0 4 3 0 3 0 0 0 0

Transporter 1 Company Name: Detrex Corporation
C. Transporter's ID Number: 0 2 9 7
D. Transporter's Phone: 708 345-3806

Transporter 2 Company Name: [Blank]
E. Transporter's ID Number: [Blank]
F. Transporter's Phone: [Blank]

Designated Facility Name and Site Address: Detrex Corporation, 2537 Le Moyne, Melrose Park, IL 60160
10. US EPA ID Number: I L D 0 7 4 4 2 4 9 3 8

G. Facility's IL ID Number: 0 3 1 1 8 6 0 0 0
H. Facility's Phone: 708 345-3806

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number): RQ, Waste Trichloroethylene, 6.1, UN1710, PG III
12. Containers: No. 01, Type: DM, Total Quantity: 0055, UN: G, Waste No: F 0 0

Table with 5 columns: No., Type, Total Quantity, UN, Waste No. Row 1: 01, DM, 0055, G, F 0 0. Includes handwritten note 'Trichloroethylene' and '16M STYAL'.

J. Additional Description for Materials Listed Above: Additional Waste # - D040
K. Handling Codes for Wastes Listed Above in Item #14: [Blank]

15. Special Handling Instructions and Additional Information: ERG #160

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name: Dan Bevans
Signature: [Signature]
Date: 0701

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICHARD FUENTES
Signature: [Signature]
Date: 0701

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [Blank]
Signature: [Blank]
Date: [Blank]

19. Discrepancy Indication Space: [Blank]

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: JULIE DERENBOWSKI
Signature: [Signature]
Date: 0701

The Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 3 years. This form has been approved by the Forms Management Center.

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No: IL D 0 0 5 4 5 5 7 1 Manifest Document No: 10 0 0 3 9

Generator's Name and Mailing Address: REXNORD CORPORATION, 2400 CURTISS ST. - DOWNERS GROVE, IL 60515

Location Different PHONE: (530) 969-1770

Illinois Manifest Document Number: IL 7536125

24-Hour Emergency and Spill Assistance Numbers: (248) 358-5800

Illinois Generator's ID: 0430300

Transporter 1 Company Name: DETREX CORPORATION

Transporter 1 US EPA ID Number: IL D 0 7 4 4 2 4 9 3 8

Illinois Transporter's ID: 0708345-3806

Transporter 2 Company Name:

Transporter 2 US EPA ID Number:

Illinois Transporter's ID:

Designated Facility Name and Site Address: DETREX CORPORATION, 2537 LE MOYNE, MELROSE PARK, IL 60160

Facility US EPA ID Number: IL D 0 7 4 4 2 4 9 3 8

Illinois Facility's ID: 03118500, Facility's Phone: 708 345-3806

US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

Containers: No, Type, Total Quantity, Unit, Waste

RG, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PG III

0.01 DM 0.0030 G XX

Additional Description for Materials Listed Above

ADDITIONAL WASTE # - D040

Handling Codes for Wastes Listed Above in Item #14

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, and disposal currently available to me which minimizes the present and future threat to human health and the environment...

Printed/Typed Name: DAN BEVANS

Signature: Dan Bevans

Month Day: 03 1

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICHARD FUENTES

Signature: Richard Fuentes

Month Day: 03 1

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name:

Signature:

Month Day:

Discrepancy Indication Space

Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Debra M. Cook

Signature: Debra M. Cook

Month Day: 03 1

The Agency is authorized to require, pursuant to Illinois Revised Statutes, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

UNIFORM HAZARDOUS WASTE MANIFEST

Generator US EPA ID No. I L D 0 0 5 4 5 5 7 1 1 0 5 0 3 9

Generator Name and Mailing Address

REXNORD CORPORATION

2400 CURTISS ST. - DOWNERS GROVE, IL 60515

Location ID Number

PHONE# (630) 969-1770

Illinois Manifest Document Number

IL 7912065

FEE PAID

24-HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: (248) 799-3820

Transporter 1 Company Name

DETREX CORPORATION

US EPA ID Number

I L D 0 7 4 4 2 4 9 3 8

Generators ID Number 0 4 3 0 3 0 0 0

Transporters ID Number 0 2 9 7

Transporters Phone 708 345-3806

Transporter 2 Company Name

Designated Facility Name and Site Address

DETREX CORPORATION

2537 LE MOYNE

MELROSE PARK, IL 60160

US EPA ID Number

I L D 0 7 4 4 2 4 9 3 8

Transporters ID Number

Transporters Phone

Facility's IL ID Number 0 3 1 1 3 5 0 0 0

Facility's Phone 708 345-3806

US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)

RG, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PG III

| 12. Containers No | 13. Total Quantity | 14. Net Weight | 15. Waste No |
|-------------------|--------------------|----------------|--------------|
| 001 | 20055 | 00024 | |

Additional Description for Materials Listed Above

0040 (ADDITIONAL WASTE #)

Handling Codes for Wastes Listed Above in Item #14

Special Handling Instructions and Additional Information

ERG #160

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and I have the best waste management method that is available to me and that I can afford.

Printed/Typed Name

IAN BEVANS

Signature

Ian Bevan

Date
Month Day
09 09

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DEYNNIS BUTLER

Signature

Deynnis Butler

Date
Month Day
09 08

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date
Month Day

Use regulatory indication space

Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

DONNA M. COOK

Signature

Donna M. Cook

Date
Month Day
09 08

This form is authorized to require pursuant to Illinois Revised Statutes, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation up to 5 years. This form has been approved by the Forms Management Center.

COPY 1, TSD MAIL TO GENERATOR

000005

UNIFORM HAZARDOUS WASTE MANIFEST

Generators US EPA ID No: IL 0005455571
Manifest Package No: 00039

Page 1 of 1
Information on the manifest is required by Federal law and is required by Illinois law

1. Generator's Name and Mailing Address: REXNORD CORPORATION, 2400 CURTISS ST. - DOWNERS GROVE, IL 60515
Location Different (530) 369-1770

A. Illinois Manifest Document Number: IL 7457212
FEE PAID
EPA APP. TAG.

4. 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: (248) 358-5800

B. Illinois Generator's ID: 043030000

5. Transporter 1 Company Name: DETREX CORPORATION
6. US EPA ID Number: IL D 07 44 24 93 8

C. Illinois Transporters ID: 0708
Transporter's Phone: 345-3806

7. Transporter 2 Company Name: [Blank]
8. US EPA ID Number: [Blank]

E. Illinois Transporters ID: [Blank]
Transporter's Phone: [Blank]

9. Designated Facility Name and Site Address: DETREX CORPORATION, 2537 LE MOYNE, MELROSE PARK, IL 60160
10. US EPA ID Number: IL D 07 44 24 93 8

G. Illinois Facility's ID: 031186000
H. Facility's Phone: 708 345-3806

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number): RQ, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PB III

12. Containers: No. 002, Type DM, Total Quantity 00110, Waste No. G

GENERATOR

a. RQ, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PB III

EPA HW Number: XX
Authorization Number: 00024

b. [Blank]

EPA HW Number: XX
Authorization Number: [Blank]

c. [Blank]

EPA HW Number: XX
Authorization Number: [Blank]

d. [Blank]

EPA HW Number: XX
Authorization Number: [Blank]

J. Additional Description for Materials Listed Above: ADDITIONAL WASTE # - D040

K. Handling Codes for Wastes Listed Above: In item #14

15. Special Handling Instructions and Additional Information: ERG #160

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, and disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAN BEVANS
Signature: [Signature]
Date: 09 24 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICHARD FUENTES
Signature: [Signature]
Date: 09 24 9

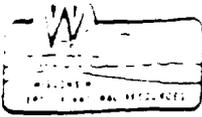
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [Blank]
Signature: [Blank]
Date: [Blank]

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: DONNA M. COOK
Signature: [Signature]
Date: 09 24

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1989, Chapter 111 1/2, Section 1004 and 1021 that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation, imprisonment up to 5 years. This form has been approved by the Forms Management Center.



FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039 Expires

| | | | | | |
|---|--|---|--|--|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. IL0003455571 | Manifest Document No. 00008 | 2. Page 1 of 1 | Information in the shaded area is not required by Federal. |
| 3. Generator's Name and Mailing Address Raxnord Corp., Bearing Division, 2400 Curtiss Street, Bensons Grove, IL 60515 | | | Attention: Mary A. McGovern | | |
| 4. Generator's Phone (630) 969-1770 | | | A. State Manifest Document Number WI J 74653 | | |
| 5. Transporter 1 Company Name Codemas Chemical Incorporated | | 5. US EPA ID Number IL060868916 | | B. State Generator's ID IL0430300003 | |
| 7. Transporter 2 Company Name Tri-State Motor Transport Company | | 8. US EPA ID Number MD0095078998 | | C. State Transporter's ID 2659 | |
| 9. Designated Facility Name and Site Address Waste Research & Reclamation 5200 State Road 93 Ken Claira, WI 54701 | | 10. US EPA ID Number WI0990829475 | | D. Transporter's Phone 800-647-31 | |
| | | | | E. State Transporter's ID 1513 | |
| | | | | F. Transporter's Phone 800-734-87 | |
| | | | | G. State Facility's ID | |
| | | | | H. Facility's Phone 715-824-9624 | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | | 12. Containers No. | Type | 13. Total Quantity |
| a. Waste Trichloroethylene (F001, D040) | | | 201 | 1 | 0.0790 |
| b. 6.1 UN 1710, PG III | | | | | |
| c. | | | | | |
| d. | | | | | |
| J. Additional Descriptions for Materials Listed Above | | | K. Handling Codes for Wastes Listed | | |
| 15. Special Handling Instructions and Additional Information In case of emergency, contact Rudy Pys at 630/969-1770, ext. 343 a. Stream #9303022-12536 ERG74 70710 | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | |
| Printed/Typed Name & Position Title Don Boveas | | | Signature <i>[Signature]</i> | | Month/Day 1/15 |
| 17. TRANSPORTER 1 Acknowledgment of Receipt of Materials | | | Signature <i>[Signature]</i> | | Month/Day 01/15 |
| Printed/Typed Name & Position Title Donald R. ... | | | Signature <i>[Signature]</i> | | Month/Day 01/13 |
| 18. TRANSPORTER 2 Acknowledgment of Receipt of Materials | | | Signature <i>[Signature]</i> | | Month/Day 01/13 |
| Printed/Typed Name & Position Title DONALD ROSE, DRIVER | | | Signature <i>[Signature]</i> | | Month/Day 01/13 |
| 19. Discrepancy Indication Space | | | | | |
| 20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | |
| Printed/Typed Name & Position Title Dean Edwin Foreman | | | Signature <i>[Signature]</i> | | Month/Day 01/15 |

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR; 2 - Generator retain; 3 - Facility send to Wis. DNR; 4 - Facility retain; 5 - Facility send to ...

Emergency 24 Hour Assistance Telephone Number In Wisconsin (608) 256-3232 Outside Wisconsin (800) 424-8802

COPY 5 - FACILITY SEND TO GENERATOR

000007



ALL COPIES MUST BE LEGIBLE,
PLEASE TYPE

Form designed for use on elite (12-pitch) typewriter.

Form Approved OMB No. 2060-0039 Expires

| | | | | | |
|---|--|---|---------------------|--|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. ILDCC5455571 | Manufacturer DOW | 2. Page 1 of 1 | Information in the shaded area is not required by Federal. |
| 3. Generator's Name and Mailing Address KEXINCO CORP BEARING OPERATION 3400 CURTISS ST. | | Site Location If Different DOWNERS GROVE, IL 60515 | | A. State Manifest Document Number WIJ505022 | |
| 4. Generator's Phone 708-969-1770 | | | | B. State Generator's ID 0430300003 | |
| 5. Transporter 1 Company Name COLEMAN CHEMICAL INC. | | 6. US EPA ID Number ILD0000866916 | | C. State Transporter's ID 2459 | |
| 7. Transporter 2 Company Name JO HUNT SPECIAL COMM. INC. | | 8. US EPA ID Number ILD981908551 | | D. Transporter's Phone 815-727-1111 | |
| 9. Designated Facility Name and Site Address WASTE RESEARCH & RECLAMATION 5300 STATE RD 23 EAUCLAIR, WI 53107 | | 10. US EPA ID Number WI14990829475 | | E. State Transporter's ID 3091 | |
| | | | | F. Transporter's Phone 800-530-1111 | |
| | | | | G. State Facility's ID | |
| | | | | H. Facility's Phone 715-831-9600 | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | 12. Containers No. | 13. Total Quantity | 14. Unit Wt/Vol | 15. Waste No. |
| a. PG- WASTE TRICHLOROETHYLENE 1 gal, UNIT 110, PETI | | 002 | 110.00 | P | FOC |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |
| J. Additional Descriptions for Materials Listed Above STREAM # 9303022-12M536 | | | | K. Handling Codes for Wastes Listed D040 | |
| 15. Special Handling Instructions and Additional Information P/IL 10/7/94; 7AM-NOON EMERGENCY # 708-969-1770 X 343 ASK FOR DAN | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | |
| Printed/Typed Name & Position Title DANIEL T BEVANS MAINT | | Signature Daniel T Bevans | | Date 1/10/94 | |
| 17. TRANSPORTER 1 Acknowledgement of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title STEVEN L ZIMMER (DRIVER) | | Signature Steven L Zimmer | | Date 1/9/94 | |
| 18. TRANSPORTER 2 Acknowledgement of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title | | Signature | | Date | |
| 19. Discrepancy Indication Space | | | | | |
| 20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | |
| Printed/Typed Name & Position Title | | Signature | | Date | |

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR
2 - Generator retains
3 - Facility send to Wis. DNR
Copies 1 & 3 mail to Wis. DNR at above address.

4 - Facility retains
5 - Facility send to
6 - Transporter retains

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608) 286-8333
Outside Wisconsin (800) 424-8802

GENERATOR RETAIN

GENERATOR LAND DISPOSAL
RESTRICTION NOTIFICATION

SHIPPING DATE: 10-07-94
GENERATOR EPA ID#: FLD005455571

MANIFEST DOC. NO.: 00002
STATE MANIFEST NO.: WI-505032

GENERATOR NAME: BEYNO CORP BEARING DIV
ADDRESS: 3400 CLERMONT ST, WINDERS GROVE, IL 60515

PRINT NAME: DANIEL J BEVANS

SIGNATURE: Daniel J Bevans

NOTE: GENERATOR MUST ATTACH THE ORIGINAL TO THE MANIFEST AND KEEP A COPY OF THIS FORM ON FILE WITH THEIR MANIFEST.

NOTE: THE ACTUAL NUMRICAL TREATMENT STANDARD(S) MUST BE COMPLETED FOR WASTE CODES F001 - F005, F039 AND CALIFORNIA LIST WASTE(S).

WRR LAB ID# 9303022-1R11530

| LINE ITEM # | WASTE CODE # | WASTE CATEGORY | TREATMENT TECHNOLOGY | 40CFR268 REFERENCE |
|-------------|-------------------|---|--|--------------------|
| 11-A | F001 D040 | NON-WASTEWATER TRICHLOROETHYLENE NON-WASTEWATER | RORGS | 268.43 |
| | DESCRIPTION | | ALL OTHER SPENT SOLVENT WASTES (MG/L) | |
| | TRICHLOROETHYLENE | | 5.600 | |

DPV



STATE OF WISCONSIN

Chapter 44, Wis. Stats
Form 4407-06

Rev 3-89

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

SEP

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved OMB No. 2050-0039 Expires 9-

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

ILD005455571

Manifest
Document No.

2. Page 1
of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

Reynold Corp. Bearing Operation, Attn: Barbara Flood
2400 Curtiss St., Downers Grove, IL 60515

A. State Manifest Document Number

WI J 86664

4. Generator's Phone (708) 969-1770

B. State Generator's ID

IL 0430300003

5. Transporter 1 Company Name
Coleman Chemical Inc.

6. US EPA ID Number

ILD060868916

C. State Transporter's ID 2439

D. Transporter's Phone 815-727-3

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Waste Research & Reclamation
Route 7

Las Claire, WI 54701

10. US EPA ID Number

WID990829475

G. State Facility's ID

H. Facility's Phone

715-834-9624

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. EQ Waste Trichloroethylene UN 1710
6.1 (F001), PG III

12. Containers
No. Type

001 B M

13. Total
Quantity

00055

14. Unit
w/vol

G

15. Waste No.

700

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed

16. Special Handling Instructions and Additional Information

In case of emergency, contact Andy Pays at 708-969-1770 ext. 343. ERG74.

a) VNR IL09303022-LMS36

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;

OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name & Position Title

Don Evans

Signature

Date
Month Day Year

17. TRANSPORTER 1 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title

Signature

Date
Month Day Year

18. TRANSPORTER 2 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title

KERRY WOOD DRIVER

Signature

Kerry Wood

Date
Month Day Year

19. Discrepancy Indication Space

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name & Position Title

Signature

Date
Month Day Year

EPA Form 8700-12 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR
2 - Generator retain
3 - Facility send to Wis. DNR

4 - Facility retain
5 - Facility send to
6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (800) 266-3232
Outside Wisconsin (800) 424-8402

Copies 1 & 3 mail to Wis. DNR at above address.

000013

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039 Expires 12/31/91

| | | | | | |
|---|--|--------------------------------------|--|----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded area is not required by Federal law. |
| 3. Generator's Name and Mailing Address WASTE MANAGEMENT CORPORATION 2000 WISCONSIN ST. | | | A. State Manifest Document Number WI 1373353 | | |
| 4. Generator's Phone 715-834-9624 | | | B. State Generator's ID 11 0488300001 | | |
| 5. Transporter 1 Company Name WASTE MANAGEMENT CORP | | 6. US EPA ID Number 160605002910 | C. State Transporter's ID 2459 | | |
| 7. Transporter 2 Company Name WASTE MANAGEMENT CORPORATION | | 8. US EPA ID Number W21249022475 | D. Transporter's Phone 815-727-3111 | | |
| 9. Designated Facility Name and Site Address WASTE MANAGEMENT & RECLAMATION ROUTE 7 EAGLE BLAINE, WI 54701 | | 10. US EPA ID Number W12990829475 | E. State Transporter's ID | | |
| | | | F. Transporter's Phone | | |
| | | | G. State Facility's ID | | |
| | | | H. Facility's Phone 715-834-9624 | | |

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit w/wt | 15. Waste No. |
|--|--------------------|------|--------------------|---------------|---------------|
| | | | | | |
| a. WASTE 1,1,1 TRICHLOROETHANE, UN 2831, 150-L DRUMS, 26 | | DRM | 150 | 6 | F 0 0 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

| | |
|--|---|
| J. Additional Descriptions for Materials Listed Above RECYCLE & RETURN | K. Handling Codes for Wastes Listed Above |
|--|---|

15. Special Handling Instructions and Additional Information
 IN CASE OF EMERGENCY, CONTACT RUBY FOYS AT 708-968-1770 EXT343.
 TEL: 9212150-18535

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;
 OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

| | | |
|-------------------------------------|-----------|-----------|
| Printed/Typed Name & Position Title | Signature | Date |
| | | Month Day |

17. TRANSPORTER 1 Acknowledgment of Receipt of Materials

| | | |
|--|-------------------------------|-----------|
| Printed/Typed Name & Position Title RAYMOND KRIVOSKI DRIVER | Signature Raymond Krivoski | Date |
| | | Month Day |

18. TRANSPORTER 2 Acknowledgment of Receipt of Materials

| | | |
|--|-------------------------|-----------------------|
| Printed/Typed Name & Position Title BERRY WOOD DRIVER | Signature Berry Wood | Date |
| | | Month Day 02/09/91 |

19. Discrepancy Indication Space
 AH Est Wt. 1815"

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| | | |
|---|------------------------------|-----------------------|
| Printed/Typed Name & Position Title Robert L Decker, foreman | Signature Robert L Decker | Date |
| | | Month Day 02/05/91 |

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2060-0039. Expires 9-30-

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
IL0006455674

Manifest Document No.

2. Page 1 of 1 Information in the shaded area is not required by Federal law

3. Generator's Name and Mailing Address

REXNOR CORPORATION BEARING OPERATION
2400 CURTISS STREET; DOWNERS GROVE, ILLINOIS 60515

A. State Manifest Document Number
WI J415142

5. Transporter 1 Company Name
COLEMAN CHEMICAL INCORPORATED

6. US EPA ID Number
IL0060868916

B. State Generator's ID
IL0430300003

7. Transporter 2 Company Name

8. US EPA ID Number

C. State Transporter's ID 2459

D. Transporter's Phone 815/727-3300

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WASTE RESEARCH & RECLAMATION
ROUTE 7
EAG CLAIRE, WISCONSIN 54701

10. US EPA ID Number
WI0990829475

G. State Facility's ID

H. Facility's Phone
715/834-9624

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

| 12. Containers No. | 13. Type | 13. Total Quantity | 14. Unit w/vol | 1. Waste No. |
|--------------------|----------|--------------------|----------------|--------------|
| 2 | DM | 110 | G | F 001 |
| 1 | DM | 20 | G | F 001 |
| | | | | |
| | | | | |

a. WASTE TRICHLOROETHYLENE UN1710

6.1 (F001)

b. WASTE 1,1,1 TRICHLOROETHANE, UN 2831

6.1 (F001)

J. Additional Descriptions for Materials Listed Above

11B 20 GAL DRUM INSIDE 55 GAL DRUM

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

IN CASE OF EMERGENCY CONTACT RUDY FUYS 708-969-1770 X343
A) ID#9305022-1RM536
B) ID#9212156-1RA533

ERG 74

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;

OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name & Position Title

ED KOMRKA MAINTENANCE MANAGER

Signature

Ed Komrka

Date
Month Day
6 11 92

17. TRANSPORTER 1 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title

Robert Corbett

Signature

Robert Corbett

Date
Month Day
6 11 92

18. TRANSPORTER 2 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title

Signature

Date
Month Day

19. Discrepancy Indication Space

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name & Position Title

Signature

Date
Month Day

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

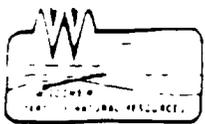
Copy Distribution: 1 - Generator send to Wis. DNR
2 - Generator retain
3 - Facility send to Wis. DNR
Copies 1 & 3 mail to Wis. DNR at above address.

4 - Facility retain
5 - Facility send to Gen
6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608) 266-3232
Outside Wisconsin (800) 424-6802

COPY 2-
GENERATOR RETAIN

000015



FOR DNR USE

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039 Expires

| | | | | | | | | | | | | | |
|---|--|---|---|------------------------------------|--|--|--|--|--|-----------------|--|---------------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. ILD005455571 | | Manifest Document No. 00000 | | 2. Page 1 of 1 | | Information in the shaded area is not required by Federal. | | | | | |
| 3. Generator's Name and Mailing Address Raymond Corp. Bearing Operation, Attn: Barbara Flood 2400 Curtiss St., Downers Grove, IL 60515 | | | | | | A. State Manifest Document Number WI J 80275 | | | | | | | |
| 4. Generator's Phone 708 969-1770 | | | | | | B. State Generator's ID | | | | | | | |
| 5. Transporter 1 Company Name Avgamic Industries | | | 5. US EPA ID Number WID000808824 | | | C. State Transporter's ID 2066 | | | | | | | |
| 7. Transporter 2 Company Name | | | 8. US EPA ID Number | | | D. Transporter's Phone 608-257-1414 | | | | | | | |
| 9. Designated Facility Name and Site Address Avgamic Industries 114 N. Main St. Cottage Grove, WI 53527 | | | 10. US EPA ID Number WID000808824 | | | E. State Transporter's ID | | | | | | | |
| | | | | | | F. Transporter's Phone | | | | | | | |
| | | | | | | G. State Facility's ID | | | | | | | |
| | | | | | | H. Facility's Phone 608-257-1414 | | | | | | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | | | | | 12. Containers No. Type | | 13. Total Quantity | | 14. Unit Wt/Vol | | 15. Waste | |
| a. Waste III Trichloroethane, C8H-1, UN2831 | | | | | | 2 CM | | 22110 G | | 7.0 | | | |
| b. | | | | | | | | | | | | | |
| c. | | | | | | | | | | | | | |
| d. | | | | | | | | | | | | | |
| J. Additional Descriptions for Materials Listed Above a) 2028, 2040 | | | | | | K. Handling Codes for Wastes Listed | | | | | | | |
| 15. Special Handling Instructions and Additional Information 1. Authorization # 13650844489 2. Material is to be reclaimed by Avgamic Inc. GENERATOR EMERGENCY RESPONSE INFORMATION PHONE NUMBER: (708) 969-1770 | | | | | | | | | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | | | | | | | | | |
| Printed/Typed Name & Position Title Don Stevens, Group Leader | | | | | | Signature | | | | | | Date | |
| 17. TRANSPORTER 1 Acknowledgement of Receipt of Materials | | | | | | Signature | | | | | | Date | |
| Printed/Typed Name & Position Title MIKE WIDOFF DRIVER | | | | | | Signature | | | | | | Date | |
| 18. TRANSPORTER 2 Acknowledgement of Receipt of Materials | | | | | | Signature | | | | | | Date | |
| Printed/Typed Name & Position Title | | | | | | Signature | | | | | | Date | |
| 19. Discrepancy Indication Space | | | | | | | | | | | | | |
| 20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | | Signature | | | | | | Date | |
| Printed/Typed Name & Position Title J M Lantieri | | | | | | Signature | | | | | | Date 3/13 | |

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.
Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608) 266-3232
Outside Wisconsin (800) 424-8802

Copy Distribution:
1 - Generator send to Wis. DNR
2 - Generator retain
3 - Facility send to Wis. DNR
4 - Facility retain
5 - Facility send to C
6 - Transporter retain
Copies 1 & 3 mail to Wis. DNR at above address.

COPY 5 - FACILITY SEND TO GENERATOR

000016

avganic



avganic industries, inc.

P.O. BOX 276
114 NORTH MAIN STREET
COTTAGE GROVE WISCONSIN 53527
508/257-1414
FAX 508/839-4293

avganic industries, inc.

BRANCH OFFICE
1300 LOCKPORT RD.
TERRE HAUTE INDIANA 47787
317-833-1414
FAX 317-833-4293

WASTE PROCESSING
CERTIFICATION OF DESTRUCTION

This document certifies that the material listed on the attached manifest, numbered WIS RC275, will be beneficially recycled or reused by Avganic Industries, Inc., located in Cottage Grove, Wisconsin (EPA ID# WID000808824).

The waste residues from our operation will be utilized in a secondary fuel stream and thermally destroyed in a RCRA permitted cement kiln.

Any material which cannot be treated as indicated above will be thermally destroyed at a licensed incinerator or aggregate kiln.

Containers used to transfer material to Avganic Industries, Inc., will be recycled for further use at an approved drum reconditioner.


Authorized Signature

AVGANIC INDUSTRIES, INC.
COTTAGE GROVE, WI 53527



FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039 Expires

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
ILD005455571

Manifest Document No.
0800

2. Page 1 of 1
Information in the spaces is not required by Federal

Generator's Name and Mailing Address
**Barnard Corp. Bearing Operation, Attn: Barbara Flood
2400 Curtiss St., Bomers Grove, IL 60515**

A. State Manifest Document Number
WI J 80273
B. State Generator's ID

4. Generator's Phone (708) **969-1770**

5. Transporter 1 Company Name
Avyamic Industries

9. US EPA ID Number
WID000808824

C. State Transporter's ID
D. Transporter's Phone **608-257-1414**

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

10. Designated Facility Name and Site Address
**Avyamic Industries
114 E. Main St.
Cottage Grove, WI 53527**

10. US EPA ID Number
WID000808824

G. State Facility's ID
H. Facility's Phone
608-257-1414

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type
13. Total Quantity
14. Unit We/Vol
15. Waste No.

| | | | | | | |
|---|------|-----|---|-------|---|---|
| a. Waste 111 Trichloroethane, OHS-2, UN2831 | F001 | 091 | 1 | 10075 | 5 | 0 |
| b. | | | | | | |
| c. | | | | | | |
| d. | | | | | | |

J. Additional Descriptions for Materials Listed Above
a) **8028, 8040**
EMERGENCY CONTACT 708-969-1770

K. Handling Codes for Wastes Listed Above

16. Special Handling Instructions and Additional Information
1. **Authorization # 1365OR-3310**
2. **Material is to be reclaimed by Avyamic Inc.**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;

(OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

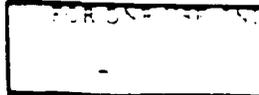
Printed/Typed Name & Position Title: **Don Evans, Group Leader**
Signature: *[Signature]*
Date: **7/1/89**

17. TRANSPORTER 1 Acknowledgement of Receipt of Materials
Printed/Typed Name & Position Title: **MIK**
Signature: *[Signature]*
Date: **7/1/89**

18. TRANSPORTER 2 Acknowledgement of Receipt of Materials
Printed/Typed Name & Position Title:
Signature:
Date:

19. Discrepancy Indication Space

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name & Position Title: **John M. Hirsch**
Signature: *[Signature]*
Date: **7/1/89**



Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039 Expires

| | | | | | |
|---|---|---|--|--|---|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. ILD003455571 | Manifest Document No. 00000 | 2. Page 1 of 1 | Information in the spaces is not required by Federal. |
| 3. Generator's Name and Mailing Address Raymond Corp. Bearing Operation, Attn: Barbara Flood 2400 Curtiss St., Bomers Grove, IL 60515 | | | A. State Manifest Document Number WI J 80274 | | |
| 4. Generator's Phone (708) 969-1770 | | | B. State Generator's ID | | |
| 5. Transporter 1 Company Name Avyamic Industries | 6. US EPA ID Number WID000808824 | C. State Transporter's ID 2006 | | | |
| 7. Transporter 2 Company Name | 8. US EPA ID Number | D. Transporter's Phone 608-257-1414 | | | |
| 9. Designated Facility Name and Site Address Avyamic Industries 114 N. Main St. Cottage Grove, WI 53527 | 10. US EPA ID Number WID000808824 | E. State Transporter's ID | | | |
| | | F. Transporter's Phone | | | |
| | | G. State Facility's ID | | | |
| | | H. Facility's Phone 608-257-1414 | | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | 12. Containers No. | Type | 13. Total Quantity | 14. Unit We/Vol |
| a. Waste III Trichloroethane, GEN-2, UN2831 | | EQ1 | 003 | 2011.0 | G |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |
| J. Additional Descriptions for Materials Listed Above a) 2028, 2046 | | | K. Handling Codes for Wastes Listed Above | | |
| 15. Special Handling Instructions and Additional Information 1. Authorization # 13650-R-36284 2. Material is to be reclaimed by Avyamic Inc. GENERATOR EMERGENCY RESPONSE INFORMATION PHONE NUMBER: (708) 969-1770 | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | |
| Printed/Typed Name & Position Title Sam Stevens, Group Leader | | Signature <i>[Signature]</i> | | Date Month Day Year 07/01 | |
| 17. TRANSPORTER 1 Acknowledgement of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title MIKE SWINER DRIVER | | Signature <i>[Signature]</i> | | Date Month Day Year 7/29 | |
| 18. TRANSPORTER 2 Acknowledgement of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title | | Signature | | Date Month Day Year | |
| 19. Discrepancy Indication Space | | | | | |
| 20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | |
| Printed/Typed Name & Position Title STEVE NORTON | | Signature <i>[Signature]</i> | | Date Month Day Year 5/16 | |

EPA Form 4400-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR
2 - Generator retain
3 - Facility send to Wis. DNR
4 - Facility retain
5 - Facility send to G
6 - Transporter retain
Copies 1 & 3 mail to Wis. DNR at above address.

Emergency 24 Hour Assistance Telephone Number
Wisconsin (608) 266-3232
Outside Wisconsin (800) 424-AR02

COPY 5 - FACILITY SEND TO GENERATOR

000019

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No
ILD005455571

Manifest Document No
31328

Page 1 of 1
Information on the manifest is required by Federal law and by Illinois law

1 Generator's Name and Mailing Address
Rexnord
2400 Curtiss St., Downers Grove, IL 60515

Location if Different
SAME

A Illinois Manifest Document Number
IL 3341328
MANIFEST FEE EXEMPT

4 Generator's Phone
708 969-1770

B Illinois Generator's ID
04303000

5 Transporter 1 Company Name
Solvent Systems Int'l Inc.

6 US EPA ID Number
ILD106926553

C Illinois Transporter's ID
D708, 931-0100

7 Transporter 2 Company Name

8 US EPA ID Number

E Illinois Transporter's ID
F () Transporter's P

9 Designated Facility Name and Site Address
Environmental Waste Resources, Inc.
2390 S. Broadway
Coal City, IL 60416

10 US EPA ID Number
ILD087157251

G Illinois Facility's ID
06302000

H Facility's Phone
815 639-2211

11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) 12 Containers No. Type 13 Total Quantity 14 Unit Weight 15 Waste Material

GENERATOR

a Hazardous Waste Liquid, N.O.S., ORM-E, NA9189, (F002).

| No. | Type | Total Quantity | Unit Weight | Waste Material | EPA HW No. | Authorization |
|-----|------|----------------|-------------|----------------|------------|---------------|
| 001 | DM | 600.55 | 1 | | 0000 | XX |
| | | | | | | XX |
| | | | | | | XX |
| | | | | | | XX |

J. Additional Descriptions for Materials Listed Above

EWR Stream #19602
Chlorinated Reclaim Program

*Virgin CSD
Cleaning That
was never used
RF*

K. Handling Codes for Wastes Listed Above in Item # 14

1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described above by the generator and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and use the best waste management method that is available to me and that I can afford.

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAN BEUVANS
Signature: Dan Beuvans
Date: 0201

18 Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: John To...
Signature: John To...
Date: 0201

19 Discrepancy Indication Space

FACILITY

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19

Printed/Typed Name: R. McKinney
Signature: R. McKinney
Date: 0201

Small print text at the bottom of the form regarding information requirements.

COPY 1. TBD MAIL TO GENERATOR COPY
COPY 6 & FILE FOR AUDIT
8-27-90 AF

P.O. Box 160
Coal City, IL 60415
(815) 634-2211



Environmental
Waste
Resources

DATE 2/16/90

Enclosed you will find the original copy of your Illinois EPA Manifest
reference to waste material that you shipped to E.W.R.

The waste described on this manifest has been placed into our H2-RO Fuel
Program and/or incinerated.

It was a pleasure doing business with your company. If we can be of
any further assistance to your company please call us at the above
phone number.

R. Hanson

E.W.R. Inc.
Manufacturing/Transportation Departments

Laboratory Analysis Report

Lab ID: 3y16 Branch: Chicago
Drum Number: 14114
Generator: Reinard Corp.
Solvent Type: Trichloroethylene Weight: 204
Date Received: 3/16/2000 Date Received: 03/13/2000

ROTOVAPOR TEST RESULTS

Estimated Percent Yield: 68
Percent of Recoverable Solvent: 58.74
Tare: 91.53
Tare Plus RX: 121.46
Tare Plus Residue: 103.29

WASTE ANALYSIS PLAN

Flammable: neg
Flash Point: >140
Specific Gravity: 0
pH: 0

| COMPONENTS | COMPONENT % ABUNDANCE |
|-------------------|-----------------------|
| Trichloroethylene | 58.7 |
| Benzene Oxide | 0.4 |
| Benzene Cl | 0.3 |
| Unknown | 0.6 |
| | 0 |
| | 0 |
| | 0 |
| | 0 |

MISCELLANEOUS ANALYSES BY REQUEST ONLY

Non Acid Acetylene (NAA): 0
Moisture Content (ppm): 0
Heat of Combustion (BTU): 0

Comments: The product was clear, and the residue was free flowing.

J. Pienowski 3-16-00

Analyst: J. Pienowski

$$\begin{array}{r} 204 \\ \times 68 \\ \hline 138.72 \text{ lbs. Recovered} \end{array}$$

$$\begin{array}{r} 210 \\ \times 68 \\ \hline 142.8 \text{ lbs. Recovered} \end{array}$$

CERTIFICATE OF RECYCLING / RECLAMATION

GENERATOR Reznord Corporation
ADDRESS 2400 Curtiss Street
CITY Downers Grove STATE IL ZIP 60515

MANIFEST No IL 8741972

WASTE DESCRIPTION RQ, Waste Trichloroethylene, 6.1, UN1710, PG III

VOLUME 1 Drum - 204 Pounds - Approximately 17 Gallons

(Lab Test Yield = 56% Reclaimable) (Chromatograph ASTM Test 8260)

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 05-01-00 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 05-04-00

Thomas L. Loe
AUTHORIZED SIGNATURE

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No

Manifest Document No

Page

Information on the spaces required by Federal law but is required by Illinois law

3 Generator's Name and Mailing Address

REARER Corporation

4900 Carlisle Street - Downers Grove, IL 60130

Location if Different

PHONE # 1030
905-770

A. Illinois Manifest Document Number

IL 8741972

4 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

1-800-368-5828

5 Transporter 1 Company Name

WASTEIA CORPORATION

6. US EPA ID Number

1-744-4430

B. Generator's IL ID Number

43030000

C. Transporter's ID Number

0297

D. Transporter's Phone (708) 345-3800

7 Transporter 2 Company Name

8. US EPA ID Number

E. Transporter's ID Number

9 Designated Facility Name and Site Address

WASTEIA CORPORATION

1501 W. 12th Avenue

WILSON PARK, IL 60100

10. US EPA ID Number

1-744-4430

F. Transporter's Phone ()

G. Facility's IL ID Number

03119670

H. Facility's Phone (708) 345-3800

11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total Quantity

Unit Wt/Vol

14

Waste No

a. Waste: trichloroeth, liq, 6.1, 1170, 111

1

1

1

EPA HW No

1170

b. Waste: trichloroeth, liq, 6.1, 1170, 111

1

1

1

EPA HW No

1170

c. Waste: trichloroeth, liq, 6.1, 1170, 111

1

1

1

EPA HW No

1170

d. Waste: trichloroeth, liq, 6.1, 1170, 111

1

1

1

EPA HW No

1170

J. Additional Description for Materials Listed Above

Additional waste # D040

Approval # 63195000

K. Handling Codes for Wastes Listed Above in item #14

15. Special Handling Instructions and Additional Information

WASTEIA

16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation, select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Ken Stevens Redolph Fuchs

Signature

Date Month Day

7-11

17 Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name

Ken Stevens

Signature

Date Month Day

7-14

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name

Ken Stevens

Signature

Date Month Day

7-14

19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials, covered by this manifest except as noted in item 19.

Printed/Typed Name

Ken Stevens

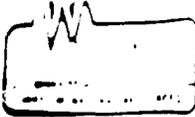
Signature

Date

Month Day

7-14

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 411 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.



FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 3-89

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
ILD005455571

Manifest Document No.
00000

2. Page 1 of 1 Information in the shaded area is not required by Federal law

Generator's Name and Mailing Address
**Raxmond Corporation, Bearing Division
2400 Curtiss Street, Bowers Grove, IL 60515**

Attention:
Mary Ann McGovern

A. State Manifest Document Number
WI J 74651

Generator's Phone (708) **969-1770**

B. State Generator's ID
IL 0430300003

Transporter 1 Company Name
Coleman Chemical Incorporated

9. US EPA ID Number
ILD060868916

C. State Transporter's ID
2659

Transporter 2 Company Name
JB Hunt Special Commodities Incorporated

8. US EPA ID Number
AR9981908331

D. Transporter's Phone - **800-647-3111**

E. State Transporter's ID
3091

Designated Facility Name and Site Address
**Waste Research & Reclamation
3200 State Road 93
Ken Claire, WI 54701**

10. US EPA ID Number
WID990829475

F. Transporter's Phone **800-368-8333**

G. State Facility's ID

H. Facility's Phone
715-834-9636

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit w/vol 15. Waste No.

**Waste Trichloroethylene (F001, R040)
6.1 UN 1710, PG III**

001 d 00700

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**In case of emergency, contact Rudy Pysa at 708/969-1770, ext. 343
a. Stream #9303022-IRK536**

IRK574

62536

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;

OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name & Position Title
Don Reynolds

Signature
Don Reynolds

Date
Month Day

17. TRANSPORTER 1 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title
KAROL DOWHAMYLADRIER

Signature
Karol Dowhamyladrier

Date
06/18/89

18. TRANSPORTER 2 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title
DONALD RANINI Driver

Signature
Donald Ranini

Date
06/18/89

19. Discrepancy Indication Space

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name & Position Title
Wayne Becker Asst. Foreman

Signature
Wayne Becker

Date
6/18/89

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR 4 - Facility retain
2 - Generator retain 5 - Facility send to Gen
3 - Facility send to Wis. DNR 6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608) 264-3232
Outside Wisconsin (800) 424-8802

Copies 1 & 3 mail to Wis. DNR at above address.

COPY 5 - FACILITY SEND TO GENERATOR

000008

print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2060-0039. Expires 9/30/93

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **1200054555710000**

Manufact. Document No.

2. Page 1 Information in the shaded area is not required by Federal.

3. Generator's Name and Mailing Address

**Rexnord Corp., Bearing Division, Attn: Mary Ann McGovern
2400 Curless St., Downers Grove, IL 60515**

A. State Manifest Document Number
WI J415135

B. State Generator's ID

4. Generator's Phone **708-969-1770**

5. Transporter 1 Company Name

Coleman Chemical Inc.

6. US EPA ID Number

WI D 0 6 0 8 6 8 9 1 6

C. State Transporter's ID **3459**

D. Transporter's Phone **313-727-3991**

7. Transporter 2 Company Name

J.B. Hunt Special Comm. Inc.

8. US EPA ID Number

AR D 9 2 1 9 0 8 5 6 1

E. State Transporter's ID **3091**

F. Transporter's Phone **800-530-7841**

9. Designated Facility Name and Site Address

**Waste Research & Reclamation
Route 7
San Claire, WI 54701**

10. US EPA ID Number

WI D 9 9 0 8 7 9 A 7 5

G. State Facility's ID

H. Facility's Phone **715-834-9434**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit wt/vol 15. Waste No.

a. **Waste Trichloroethylene (P001, D040)
Class 6.1 UN 1710, PG III**

1 container, 1 drum, 270.0

| 11. US DOT Description | 12. Containers No. | Type | 13. Total Quantity | 14. Unit wt/vol | 15. Waste No. |
|--|--------------------|------|--------------------|-----------------|---------------|
| a. Waste Trichloroethylene (P001, D040) Class 6.1 UN 1710, PG III | 1 | drum | 270.0 | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

16. Special Handling Instructions and Additional Information

**In case of emergency, contact Rudy Pays at 708/969-1770 ext. 343. ERG74
a) WBLR ID#9303022-1EM536**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;

OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Generator's Name & Position Title

Don Evans

Signature

[Signature]

Date
Month Day Year

TRANSPORTER 1 Acknowledgement of Receipt of Materials

Name & Position Title

John L. ...

Signature

[Signature]

Date
Month Day Year

TRANSPORTER 2 Acknowledgement of Receipt of Materials

Name & Position Title

David ...

Signature

[Signature]

Date
Month Day Year

Emergency Indication Space

Facility Owner OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as stated in Item 19.

Name & Position Title

John A. ...

Signature

[Signature]

Date
Month Day Year

(Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator send to Wis. DNR
2 - Generator retain
3 - Facility send to Wis. DNR

4 - Facility retain
5 - Facility send to C
6 - Transporter retain

Assistance Telephone Number

(808) 286-3232
(800) 424-8802

COPY 5-

Copies 1 & 3 mail to Wis. DNR at above address.

FACILITY SENT TO GENERATOR

000009



lease print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved OMB No. 2060-0088. Expires 9-30-

| | | | | | |
|---|--|---|--|----------------|---|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. W120054557 | Manifest Document No. 00000 | 2. Page 1 of 1 | Information in the shaded area is not required by Federal law |
| 3. Generator's Name and Mailing Address Barnard Corp., Bearing Division, Attn: Mary Ann McGovern 3408 Curtis St., Browns Grove, IL 60515 | | | | | |
| 4. Generator's Phone (708) 969-1770 | | | | | |
| 6. Transporter 1 Company Name Solomon Chemical Inc. | | | 6. US EPA ID Number W12000000000000000000000000000000 | | |
| 7. Transporter 2 Company Name J.R. Hunt Special Chem. Inc. | | | 8. US EPA ID Number W12000000000000000000000000000000 | | |
| 9. Designated Facility Name and Site Address Waste Research & Reclamation Route 7 Fox Clara, WI 54701 | | | 10. US EPA ID Number W12000000000000000000000000000000 | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | | | 12. Quantity | 13. Units |
| a. Waste Trichloroethylene (TCE), 2040 Class 3.1 UN 1774, PG III | | | | 001 | 205 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |
| 18. Special Handling Instructions and Additional Information In case of emergency, contact Rudy Puyo at 708/969-1770 ext. 343. 2874 a) WMR ID#9363823-12534 | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal current available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | |
| Printed/Typed Name & Position Title Sam Stevens | | | Signature <i>[Signature]</i> | | Date 5/2/93 |
| 17. TRANSPORTER 1 Acknowledgment of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title | | | Signature | | Date |
| 18. TRANSPORTER 2 Acknowledgment of Receipt of Materials | | | | | |
| Printed/Typed Name & Position Title Cliff Jamison DRIVER | | | Signature <i>[Signature]</i> | | Date 5/2/93 |
| 19. Discrepancy Indication Space | | | | | |
| 20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 18. | | | | | |
| Printed/Typed Name & Position Title Wayne Becker Asst. Foreman | | | Signature <i>[Signature]</i> | | Date 5/2/93 |

EPA Form 6700-12 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution: 1 - Generator and to Wis. DNR
2 - Generator retain
3 - Facility sent to Wis. DNR
4 - Facility retain
5 - Facility sent to Wis. DNR
6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (800) 296-8833
Outside Wisconsin (800) 424-8802

COPY 5-

Copies 1 & 3 sent to Wis. DNR at above address.

FACILITY SENT TO GENERATOR

000010

Lab ID#: 2838
Drum Numbers: 13808
Generator: Roxnord
Solvent Type: Trichloroethylene
Date Released: 7/10/99

Branch: Chicago
Weight: 449
Date Received: 7/8/99

GAS chromatogram

ROTOVAPOR TEST RESULTS

Estimated Percent Yield: 84
Percent of Recoverable Solvent: 55.76
Tare: 88.51
Tare Plus RX: 140.8
Tare Plus Residue: 108.6

WASTE ANALYSIS PLAN

Flammable: neg
Flash Point: >140
Specific Gravity: 0
pH: 0

| COMPONENTS | COMPONENT % ABUNDANCE |
|-------------------|--------------------------|
| Trichloroethylene | 58.11 |
| BuOCl | 0.3 |
| Butylene Oxide | 0.2 |
| Unknown | 0.4 |
| | 0.1 |
| | 0.1 |
| | 0.1 |
| | 0.1 |

MISCELLANEOUS ANALYSES BY REQUEST ONLY

Non Acid Acceptance (NAA): 0
Moisture Content (ppm): 0
Heat of Combustion (BTU): 0

Comments: The product was clear, and the residue was free flowing.

Analyst: J. Ridenour

2 Cook 7/14/99

*Rich at Detrex -> use 84% No.
The 55.76 No is what they use for measuring
Some Solvent is Not included in the 55% No
because it is bound to the Residue i.
Use the 84% No RF 11-16-99*

CERTIFICATE OF RECYCLING / RECLAMATION

- GENERATOR Rexnord Corporation
ADDRESS 2400 Curtiss Street
CITY Downers Grove STATE IL ZIP 60515

MANIFEST NO. IL 8665014

WASTE DESCRIPTION RQ, Waste Trichloroethylene, 6.1, UN1710, PG III

VOLUME 1 drum containing 449 lbs of which 203 lbs were recycled as waste and 246 lbs were reclaimed as trichloroethylene.

$$\frac{246}{449} = 55\%$$

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 09-30-99 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 10-07-99

Dr. Leta Lee
AUTHORIZED SIGNATURE

CERTIFICATE OF RECYCLING / RECLAMATION

GENERATOR Rexnord Corporation
ADDRESS 2400 Curtiss St.
CITY Downers Grove STATE IL ZIP 60515

MANIFEST No IL 7912065 9/8/98 For June 98 pump out
WASTE DESCRIPTION RQ. Waste Trichloroethylene, 6.1, UN1710, PG III
VOLUME 1 Drum - 618 Pounds - Approximately 50 Gallons
(Lab Test Yield = 74% Reclaimable)

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 11/2/98 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 11/2/98

Danna M. Cook
AUTHORIZED SIGNATURE

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No. **IL D 0 0 5 4 5 5 7 2** Manifest Document No. **10 0 0 3 9**

Page 1 of 1
Information on this manifest is required by 62 ILCS 310/1-1.1 and 310/1-1.2.

1. Generator's Name and Mailing Address
REXNORD CORPORATION
2400 CURTISS ST. - DOWNERS GROVE, IL 60515
 Location: Different PHONE: (630) **369-1770**

2. 24-HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: **(248) 799-3820**

3. Transporter 1 Company Name
DETREX CORPORATION 6 US EPA ID Number **IL D 0 7 4 4 2 4 9 3 8**

4. Transporter 2 Company Name
 8 US EPA ID Number

5. Designated Facility Name and Site Address
DETREX CORPORATION
2537 LE MOYNE
WILBOSE PARK, IL 60160 10 US EPA ID Number **IL D 0 7 4 4 2 4 9 3 8**

A. Illinois Manifest Document Number
IL 7912065 FEE PAID \$300.00

B. Generator's IL ID Number **043030000**

C. Transporter's ID Number **0297**

D. Transporter's Phone **708 345-3806**

E. Transporter's ID Number

F. Transporter's Phone

G. Facility's IL ID Number **031260000**

H. Facility's Phone **708 345-3806**

6. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

| a | 12. Containers No. | 13. Total Quantity | 14. Unit Weight | 15. Waste No. |
|--|--------------------|--------------------|-----------------|---------------|
| | | | | |
| RG, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PG III | 001 | 00055 | 0002- | 0002- |
| | | | | |
| | | | | |
| | | | | |

J. Additional Description for Materials Listed Above
D040 (ADDITIONAL WASTE #)

K. Handling Codes for Wastes Listed Above
 In Item #14

15. Special Handling Instructions and Additional Information
ERG #160

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **DAN BEVANS** Signature: *Dan Bevans* Month/Day/Year: **09/08**

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name: **DEVIN'S BUTLER** Signature: *Devin's Butler* Month/Day/Year: **09/08**

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name: Signature: Month/Day/Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name: **DONNA M. COOK** Signature: *Donna M. Cook* Month/Day/Year: **09/08**

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation or imprisonment up to 3 years. This form has been approved by the Forms Management Center.

June '98 per post

CERTIFICATE OF RECYCLING / RECLAMATION

GENERATOR Raymond Corporation
ADDRESS 2400 Curtiss St.
CITY Downers Grove STATE IL ZIP 60515

June 98 pickup out

MANIFEST NO IL 7912065

WASTE DESCRIPTION RQ. Waste Trichloroethylene, 6.1, UN1710, PG III

VOLUME 1 Drum - 618 Pounds - Approximately 50 Gallons

(Lab Test Yield = 74% Reclaimable) (Chromatograph ASTM Test 8260)

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 11/2/98 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 11/2/98

Danna M. Cook
AUTHORIZED SIGNATURE

CERTIFICATE OF RECYCLING / RECLAMATION

GENERATOR REXNORD CORPORATION
ADDRESS 2400 CURTISS ST.
CITY DOWNERS GROVE STATE IL ZIP 60515

MANIFEST NO IL 7536125 *Dated 3/11/98* *See '98 pump out*

WASTE DESCRIPTION RQ, WASTE TRICHLOROETHYLENE, 6.1, UN1710, PG III

VOLUME 1 DRUM - 184 POUNDS - APPROXIMATELY 15 GALLONS

(LAB TEST YIELD = 71% RECLAIMABLE)

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 4/29/98 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 5/8/98

Danna M. Cook
AUTHORIZED SIGNATURE

From pump out on 12/15/97
Shipped 3/11/98

Report received 5/13/98, spreadsheet adjusted
6/04 @ 70% vs 175 @ 93%, for see '97 5/13/98 AF

CERTIFICATE OF RECYCLING / RECLAMATION

GENERATOR REXNORD CORPORATION
ADDRESS 2400 CURTISS ST.
CITY DOWNERS GROVE STATE IL ZIP 60515

MANIFEST NO IL 7457212
WASTE DESCRIPTION RO. WASTE TRICHLOROETHYLENE, 6.1, UN1710, PGIII
VOLUME 2 DRUMS - 105 GALLONS - 1295 POUNDS - 87% YIELD TEST GAS
CHROMATOGRAPH ASTM TEST 8260

290
250
753
1293

DETREX CORPORATION, SOLVENTS DIVISION DOES HEREBY MAKE NOTIFICATION TO YOU, THE GENERATOR LISTED ABOVE, OF THE ABOVE REFERENCED SHIPMENT, THAT THE ENTITLED WASTE, LISTED ABOVE, WAS PROCESSED ON 10-17-97 (DATE) AND WAS RECYCLED/RECLAIMED IN ACCORDANCE WITH ALL CURRENT FEDERAL, STATE AND LOCAL ENVIRONMENTAL REGULATIONS.

DATE 11/5/97

Dorcas M. Cook
AUTHORIZED SIGNATURE

orig mailed to Rudy Fuchs on 11-5-97

November 8, 1996

Rexnord Corp
Attn: Rudy Fuys
2324 Curtiss St
Downers Grove IL 60515

RE: Shipments of ID #9303022-1RM536, Trichloroethylene

Dear Rudy:

This is in response to your request for the percentage of trichloroethylene in your last shipments of profile ID #9303022-1RM536. The following *estimates* were derived from distillation, density and gas chromatography of your material.

| <u>Shipment Date</u> | <u>Load #</u> | <u>% Trichloroethylene</u> | |
|----------------------|---------------|----------------------------|--------------|
| 6/15/95 | 52453 | 70-72% | small amount |
| 1/17/96 | 60322 | 95% | 52526 (100%) |
| 6/18/96 | 62536 | 92% | > |

In the future, if you wish to receive a Laboratory Report of Incoming Materials on each load, a request must be made to Customer Service prior to the shipment of the material. A \$50.00 charge will be incurred. This report will include the results of a solvent scan utilizing a gas chromatograph. It will report whether or not your waste stream contained any of the following solvents and at what concentrations: acetone, benzene, n-butyl alcohol, sec-butyl alcohol, t-butyl alcohol, cyclohexane, 1,2 dichloroethylene, methylene, trichloro, trifluoroethane, isopropyl alcohol, methanol, methoxyethanol, methyl isobutyl ketone, methyl ethyl ketone, styrene, perchloroethylene, toluene, 1-1-1 trichloroethane, trichloroethylene, vinyl acetate, xylene (mixed isomers).

If you have any further questions, you may reach me at 715-836-9764.

Sincerely,

WRR ENVIRONMENTAL SERVICES CO., INC.

Eila R. Goins
Customer Service Manager

Need to have wt & % of Product determined

| | | | | | | | |
|----|--|----|------|-----|------|-----|------|
| 11 | | 14 | 3.82 | 178 | 1.87 | 405 | 2.43 |
| 12 | | 14 | 3.78 | 177 | 1.86 | 405 | 2.43 |
| 13 | | 14 | 1.13 | 109 | 1.13 | 405 | 2.43 |
| 14 | | 14 | 1.28 | 113 | 1.18 | 405 | 2.43 |
| 15 | | 14 | 1.36 | 118 | 1.13 | 405 | 2.43 |
| 16 | | 14 | 1.19 | 112 | 1.00 | 405 | 2.43 |
| 17 | | 14 | 3.82 | 177 | 1.86 | 405 | 2.43 |
| 18 | | 14 | 3.88 | 184 | 1.11 | 405 | 2.43 |
| 19 | | 14 | 3.82 | 178 | 1.87 | 405 | 2.43 |
| 20 | | 14 | 3.75 | 183 | 0.88 | 405 | 2.43 |
| 21 | | 14 | 1.20 | 179 | 1.87 | 405 | 2.43 |
| 22 | | 14 | 1.22 | 181 | 1.88 | 405 | 2.43 |
| 23 | | 14 | 1.16 | 178 | 1.08 | 405 | 2.43 |
| 24 | | 14 | 1.19 | 174 | 1.08 | 405 | 2.43 |
| 25 | | 14 | 1.10 | 169 | 1.83 | 405 | 2.43 |
| 26 | | 14 | 1.36 | 184 | 1.11 | 405 | 2.43 |
| 27 | | 14 | 1.36 | 192 | 1.18 | 405 | 2.43 |
| 28 | | 14 | 1.70 | 198 | 1.18 | 405 | 2.43 |
| 29 | | 14 | 1.27 | 203 | 1.22 | 405 | 2.43 |
| 30 | | 14 | 1.43 | 214 | 1.28 | 405 | 2.43 |
| 31 | | 14 | 1.42 | 227 | 1.26 | 405 | 2.43 |
| 32 | | 14 | 1.29 | 210 | 1.26 | 405 | 2.43 |
| 33 | | 14 | 1.16 | 211 | 1.27 | 408 | 3.43 |

345
1024.6

3 of 3



SOLVENTS & ENVIRONMENTAL SERVICES DIVISION

Invoice

| DATE | INVOICE |
|----------|---------|
| 2/6/2001 | 30486 |

BILL TO
 63195000
 Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

SHIP TO
 63195000
 Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

| P O NUMBER | TERMS | REP | SHIP | VIA | F O B. | PROJECT |
|------------|--------|-----|----------|-------------|--------|---------|
| WE 224334 | Net 30 | SS | 2/6/2001 | Detrex - CH | | |

| QUANTITY | ITEM CODE | DESCRIPTION | PRICE EACH | AMOUNT |
|----------|-----------|--|----------------|--------|
| 1.320 | 1312 | Virgin Trichloroethylene 2 drums Sales Tax | 0.665 7.75% | 8 |

RECEIVED
 0214061
 FEB 12 2001
 065-825
 DATE

Total

000035

BILL OF LADING
24 HOUR EMERGENCY RESPONSE # 248-799-3820

Detrex Corporation
 (NAME OF CARRIER)

DATE 1-5-01

TO: 63195000
COSIGNEE: Rexnord Corporation
STREET: 2400 Curriess St.
DESTINATION: Downers Grove, IL 60515
ORDER#: WE 224634

FROM: 
 2537 LE MOYNE
 MELROSE PARK, IL 60160
 (708) 345-3806
 FAX: (708) 345-3903
 (800) 486-3806

| No. Shipping Unit | Container | HM | Description of Articles (IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME) | Hazard Class | ID Number | Packing Group | WEIGHT (Subject to Commodity) |
|-------------------|-----------|----|--|--------------|-----------|---------------|------------------------------------|
| 2 | Drums | X | PC, Trichloroethylene VIRGIN | 6.1 | UN1710 | III | Gross 1400 lb Net 1380 lb |

Consignee Sig. _____ Date? _____

Note-Where the rate is dependent on the value shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of this shipment without payment of freight and all other charges.

Signature of Consignor: _____

FREIGHT CHARGES

Driver Initials *P.R.*

Prepaid Collect

RECEIVED: subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described as apparent good order except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above which carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) shall carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable requirements of the Commodity Classification Administration.

By *S. J. Derengowski*

PLACARDS
REQUIRED

PLACARDS
SUPPLIED

YES NO - Furnished by carrier

Driver's Signature

SHIPPER: DETREX CORPORATION

AGENT

PRINT & SIGN

J. Derengowski

PRINT & SIGN

DATE



Rex Bearing Division
2400 Curtiss Street
Caller No 1482
Downers Grove, IL 60515-0722
630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| | | | | | |
|---------------|-------|------------|--------------------|-------|-------|
| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
| | | TAXABLE | | | |

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY | FROM |
|------|----------|-----|---|-----------|----------------------|------|
| | | | PART 455724 TRICHLOROETHYLENE 55 GAL DRUM 660 LBS PER DRUM NOTE: USED ICE AND EMPTY DRUMS MUST BE PICKUP AT TIME OF DEL. PICK UP 2 EMPTIES AND 1 WASTE DRUM WITH 20% OF SPENT TRICHL. NOTE: DELIVERY MUST BE MADE BETWEEN 7:00AM AND 12:00 (MIDN) PLS NOTIFY DAN BEVANS OF DELIVERY DATE * | | | |
| | | | | NET VALUE | \$877.80 | |

APL APR 01Z

Charles Uy

WE-2243

H35736



CORPORATION

SOLVENTS & ENVIRONMENTAL SERVICES DIVISION

Invoice

| | |
|----------|-----------|
| DATE | INVOICE # |
| 9/7/2000 | 30152 |

BILL TO
 63195000
 Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

SHIP TO
 63195000
 Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

| P.O. NUMBER | TERMS | REP | SHIP | VIA | F.O.B. | PROJECT |
|-------------|--------|-----|----------|-------------|--------|---------|
| WE-218272 | Net 30 | SS | 9/7/2000 | Detrex - CH | | |

| QUANTITY | ITEM CODE | DESCRIPTION | PRICE EACH | AMOUNT |
|----------|-----------|---|----------------|-----------------|
| 1,320 | 1312 | virgin trichloroethylene - 2 drums Sales Tax | 0.665 7.75% | 877.80 68.03 |

**REMIT TO: DEPT 064138
 DETREX CORP.
 P.O. BOX 64000
 DETROIT, MI 48204
 REYNORD BEARING DIV A/P DEPT**

AP VCHR 24- **0527077**

RECD SEP 15 2000 APPR

VENDOR # **065-825**

TERMS CODE | DUE DATE

| | |
|--------------|----------------|
| Total | 3945.83 |
|--------------|----------------|

000038

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 248-799-3820

Detrex Corporation
[NAME OF CARRIER]

DATE 09-07-00

TO:
COSIGNEE
STREET
DESTINATION
ORDER#

03195000
Rexnord Corporation
2400 Curtiss Street
Downers Grove, IL 60515
AZ - 210272

FROM:

2537 LE MOYNE
MELROSE PARK, IL 60160
(708) 345-3806
FAX: (708) 345-3903
(800) 486-3806

| No. Shipping Unit | Container | HM | Description of Articles <small>(IF HAZARDOUS MATERIAL - PROPER SHIPPING NAME)</small> | Hazard Class | ID Number | Packing Group | WEIGHT |
|-------------------|-----------|----|--|--------------|-----------|---------------|----------------------------|
| 1 | DRUMS | X | R., Trichloroethylene (VIRGIN) | c. 1 | UN1710 | III | Gross 140 Net 130 |

Consignee Signature Date 9-7-00

Note-Where the rate is dependent on the value shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of this shipment without payment of freight and all other charges.

Signature of Consignor: _____

FREIGHT CHARGE

Driver Initials PS

Prepaid Collect

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described is apparent good order except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above. The carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) shall carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions and hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Per Signature

HAZARDS REQUIRED **HAZARDS SUPPLIED**

YES NO - Furnished by carrier

Driver's Signature _____

SHIPPER: DETREX CORPORATION

AGENT

PRINT & SIGN L. Cushion Signature

DATE

PRINT & SIGN _____

2400 Corniss Street
 Carrier No. 1482
 Downers Grove, IL 60515-0722
 630.969-1770 FAX. 630.969-8827

MUST APPEAR ON ALL INVOICES PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

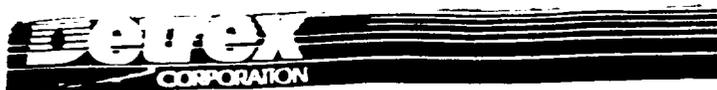
VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
|---------------|----------|------------|--|----------|---------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | BOUNDED IN PLANT BY |
| | | | <p>PLEASE USE THE FOLLOWING INFORMATION TO IDENTIFY THE PRODUCT THE ABOVE PARTS OR THE NAME OF THE PARTS AND SOLUTIONS NOTE: DELIVERY MUST BE MADE IN CUPEN PROGRAM AND 12 HRS ADVANCE NOTICE CAN BE GIVEN BY TELEPHONE</p> | | |
| TOTAL VALUE | | | | \$677.00 | |

Handwritten signature

REF
 H3573A



2537 Le Moyne - Melrose Park, IL 60160
 PHONE (708) 345-3806 FAX (708) 345-3903

INVOICE NUMBER 09001
 INVOICE DATE 03/20/00
 DIVISION 09

SOLD TO 53195000

SHIP TO

Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

| | | | |
|-------------|-----------|----------------|--------|
| SALES MGR | | TYPE | EAC |
| P O NUMBER | WE-209709 | OTHER INV. REF | |
| SHIP VIA | OUR TRK | WAREHOUSE | 199 |
| SHIP DATE | 02-14-00 | TERMS | NET 30 |
| SALESPERSON | 4152 | DUE DATE | |
| | | MANIFEST # | |
| | | CONTROL # | |

| QUANTITY | PRODUCT NAME | PROD. # | Y%/APP # | QTY SHIP | UNIT PRICE | EXT AMT |
|----------|---|---------|----------|----------|------------|---------|
| | Charge for disposal of waste trichloroethylene p/u on 02-14-00 on Man # IL6741972 | 562237 | | 1 | 125.00/Ea | 125.00 |

REXNORD BEARING DIV AP DEPT
 AP VCHR 24- 0331040
 RECD MAR 27 2000
 VENDOR # 065-825
 TERMS CODE | DUE DATE

METER GALLONS _____
 ON BULK DELIVERY _____ x _____ = _____ LBS.
 _____ DEGREES FAHRENHEIT FOR THE DAY

| | |
|----------|------|
| SUBTOTAL | 125. |
| TAX | |
| PAYMENT | |
| TOTAL | 125. |

WE HEREBY CERTIFY THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH ALL APPLICABLE REQUIREMENTS OF SECTIONS 8, 7 & 12 OF THE FAIR LABOR STANDARDS ACT AMENDED & OF REGULATIONS AND ORDERS OF THE ADMINISTRATOR OF THE WAGE & HOUR DIVISION ISSUED UNDER SECTION 14 THEREOF

CUSTOMER DU



2537 Le Moyne - Melrose Park, IL 60160
 PHONE (708) 345-3806 FAX (708) 345-3903

INVOICE NUMBER 29600
 INVOICE DATE 032200
 DIVISION 09

SOLD TO 63195000



SHIP TO:

Rexnord Corporation
 2400 Curtiss Street
 Downers Grove, IL 60515

323970
003931

| | | | |
|-------------------|-----------|----------------------|--------|
| SALES MGR | | TYPE | EAC |
| P.O. NUMBER | WE-209769 | OTHER INV. REF | |
| SHIP VIA | OUR TRK | WAREHOUSE | 198 |
| SHIP DATE | 02-14-00 | TERMS | NET 30 |
| SALESPERSON | 4152 | DUE DATE | |
| | | MANIFEST # | |
| | | CONTROL # | |

| QUANTITY | PRODUCT NAME | PROD. # | Y%/APP # | QTY. SHIP | UNIT PRICE | EXT AMCL |
|----------|--------------|---------|----------|-----------|------------|----------|
|----------|--------------|---------|----------|-----------|------------|----------|

| | | | | | | |
|--|---|--------|--|---|-----------|--------|
| | Charge for disposal of waste trichloroethylene p/u on 02-14-00 on Man # IL8741972 | 562237 | | 1 | 125.00/Ea | 125.00 |
|--|---|--------|--|---|-----------|--------|

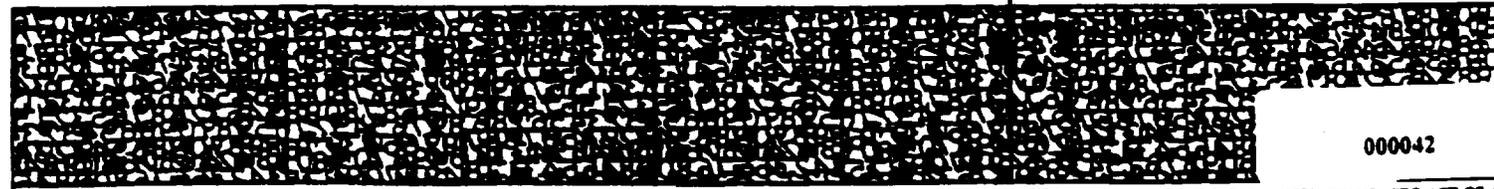
**REMIT TO: DEPT 864136
 DETREX CORP.
 P.O. BOX 64300
 DETROIT, MI 48264**

REXNORD BEARING DIV A/P DEPT

| | | |
|------------|-------------|------|
| AP VCHR | 24- | APPR |
| RECD | MAR 27 2000 | |
| VENDOR # | | |
| TERMS CODE | DUE DATE | |

METER GALLONS _____ x _____ = _____ LBS.
 _____ DEGREES FAHRENHEIT FOR THE DAY

SUBTOTAL : 125.00
 TAX :
 PAYMENT :
 TOTAL : 125.00



000042

WE HEREBY CERTIFY THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH ALL APPLICABLE REQUIREMENTS OF SECTIONS 6, 7 & 12 OF THE FAIR LABOR STANDARDS ACT OF 1937 AS AMENDED & OF REGULATIONS AND ORDERS OF THE ADMINISTRATOR OF THE WAGE & HOUR DIVISION ISSUED UNDER SECTION 14 THEREOF.

CUSTOMER ORIC

Flex Bearing Division
2400 Curtiss Street
Caller No 1482
Downers Grove, IL 60515-0722
630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

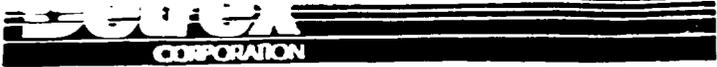
MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | | BUYER | | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
|---------------|----------|-------|-------------|------------|----------------------|---------|-------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUINED IN PLANT BY | PROVINT | |
| | | | | | | | |

Manning



3537 Le Moyne - Melrose Park, IL 60180
 PHONE (708) 345-3806 FAX (708) 345-3903

INVOICE NUMBER 45003
 INVOICE DATE 02/14/00
 DIVISION 03

SOLD TO 00195000

SHIP TO

Rexnord Corporation
 1400 Curtiss Street
 Downers Grove, IL 60515

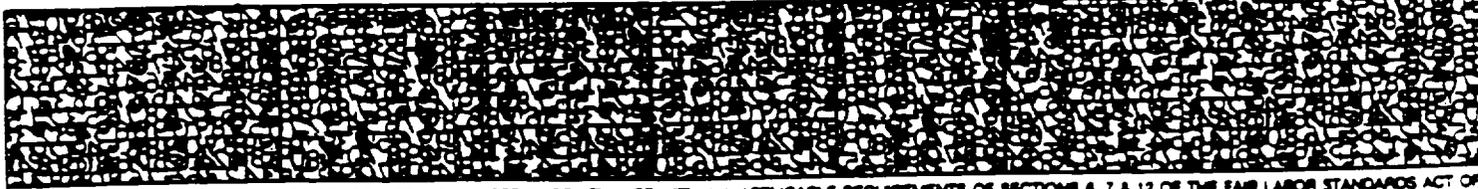
| | | | |
|-------------|-----------|---------------|--------|
| SALES MGR | | TYPE | EAC |
| P.O. NUMBER | WE-209769 | OTHER INV REF | |
| SHIP VIA | OUR TRK | WAREHOUSE | 198 |
| SHIP DATE | 02-14-00 | TERMS | NET 30 |
| SALESPERSON | 4152 | DUE DATE | |
| | | MANIFEST # | |
| | | CONTROL # | |

| QUANTITY | PRODUCT NAME | PROD. # | Y%/APP # | QTY SHIP | UNIT PRICE | EXT AMT |
|----------|--------------------------|---------|----------|----------|------------|---------|
| 2 DUMS | Virgin trichloroethylene | 1312 | | 1320 Lbs | .6600/Lb | 877.80 |

REXNORD BEARING DIV AP DEPT
 AP VCHR 24- 0222086
 RECD FEB 18 2000
 VENDOR # 065-825
 TERMS CODE 1 DUE DATE

METER GALLONS _____ x _____ = _____ LBS.
 _____ DEGREES FAHRENHEIT FOR THE DAY

SUBTOTAL : 877.8
 TAX : 68.0
 PAYMENT :
 TOTAL : 945.8



WE HEREBY CERTIFY THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH ALL APPLICABLE REQUIREMENTS OF SECTIONS 6, 7 & 12 OF THE FAIR LABOR STANDARDS ACT OF 1937 AS AMENDED & OF REGULATIONS AND ORDERS OF THE ADMINISTRATOR OF THE WAGE & HOUR DIVISION ISSUED UNDER SECTION 14 THEREOF.

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 248-799-3820

[NAME OF CARRIER]

DATE _____

TO:
COSIGNEE
STREET
DESTINATION
ORDER#

03795000
Rexford Corporation
2400 Curtiss Street
Lynners Grove, IL 60515
WE - 2769

FROM: **detrex**
CORPORATION
2537 LE MOYNE
MELROSE PARK, IL 60160
(708) 345-3806
FAX: (708) 345-3903
(800) 486-3806

| No Shipping Unit | Container | HMS | Description of Articles (IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME) | Hazard Class | ID Number | Packing Group | WEIGHT (Subject to Contract) |
|------------------|-----------|-----|--|--------------|-----------|---------------|---------------------------------|
| 2 | DRUMS | A | RQ, Trichloroethylene, 6 (VIRGIN) | 6.1 | UN1710 | III | Gross 2400 Lbs Net 132 |

Consignee Sig.....Date.....

Note-Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
\$ _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other charges.

Signature of Consignor

FREIGHT CHARGES:
Driver Initials... *R.F.*
 Prepaid Collect

RECEIVED subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described in apparent good order, except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above with carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, it is mutually agreed each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.
Per _____

PLACARDS REQUIRED YES NO - Furnished by carrier
PLACARDS SUPPLIED
Driver's Signature _____

SHIPPER: DETREX CORPORATION

AGENT _____

PRINT & SIGN L. Cushion _____

PRINT & SIGN _____ DATE _____

Rex Bearing Division
2400 Curtiss Street
Carter No 1482
Downers Grove, IL 60515-0722
630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
|---------------|----------|------------|---|-------|----------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY |
| | | | <p>REX BEARING DIVISION 2400 CURTISS STREET DOWNERS GROVE, ILLINOIS 60515-0722 630/969-1770 FAX: 630/969-8827</p> | | |

630-969-1770
630-969-1770

435736

Detrex

2537 LE MOYNE - MELROSE PARK, IL 60150

SOLD TO: 63195000

REXNORD COMPANY
 REX BEARING
 2400 CURTIS ST. - MELROSE, IL 60150
 JOINERS GROVE, IL 60150

| | | | |
|------------------|-----------|---------------------|--------|
| SALES MGR..... | WE-178682 | TYPE..... | |
| P.O. NUMBER..... | | COMMERCIAL USE..... | |
| SHIP VIA..... | OUR TRK | WAREHOUSE..... | 254 |
| SHIP DATE..... | 12-9-97 | TERMS..... | NET 30 |
| SALESPERSON..... | 3850 | DUE DATE..... | |
| | | MANIFEST #..... | |
| | | CONTROL #..... | |

| QUANTITY | PRODUCT NAME | PROD. # | YR/APP. # | OFF. SHIP | UNIT PRICE | EXT. AMOU |
|----------|---------------------------|---------|-----------|-----------|------------|-----------|
| 2 DRUMS | VIRGIN. TRICHLOROETHYLENE | 1512 | | 25.00 LBS | 3480.00 | 87.80 |

DETREX CORP.
(Name of Carrier)

Date 12/9/57

TO
Consignee
Street
Destination
Order #

REAR CORP. (EX HEARING UP.)
2405 WILSON ST. - CHICAGO 41482
CHICAGO, ILL. 60611-0122
12-1160

FROM:

Detrex

2557 LE MOYNE
ROSELAND PARK, ILL 60160

000057

| | | | | | | | |
|-------------|---|------------------------------------|-----|--------|-----|------------------------------|-----|
| UNITS | Q | W. TRICHLOROMETHYLENE (MER. 10) | 5.1 | UN1710 | 111 | GROSS 1400 NET 1320 | 160 |
| UNSIGNATURE | | DATE | | | | | |

Note: Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other charges.

(Signature of Consignor)

FREIGHT CHARGES
DRIVER INITIALS *... ..*
 Prepaid Collect

(TENTATIVE) subject to the classifications and tariff rates in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to a named place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his consignee.

(This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation)
Per _____

YES NO - FURNISHED BY CARRIER
DRIVER'S SIGNATURE: _____

SHIPPER Detrex Corporation
PER _____

AGENT
PER _____ DATE _____

MEMORANDUM COPY

4

Rex Bearing Division
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING NUMBER

MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
|---------------|----------|------------|--|-------------|--------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | BOUNDS IN PLANT BY |
| | | | <p>THIS ORDER IS SUBJECT TO THE TERMS AND CONDITIONS OF THE PURCHASE ORDER. THE BUYER AGREES TO HOLD THE SUPPLIER HARMLESS FROM ALL CLAIMS AND DAMAGES OF ANY KIND INCLUDING ATTORNEY'S FEES AND COSTS OF LITIGATION ARISING OUT OF OR IN CONNECTION WITH THIS ORDER OR THE PERFORMANCE THEREOF. THE SUPPLIER'S OBLIGATION UNDER THIS ORDER SHALL BE LIMITED TO THE GOODS SPECIFICALLY ORDERED AND SHIPPED HEREUNDER. THE SUPPLIER SHALL NOT BE RESPONSIBLE FOR DELAYS CAUSED BY CUSTOMERS LOGISTICS OR OTHER THIRD PARTY OPERATIONS. THE SUPPLIER'S LIABILITY SHALL BE LIMITED TO THE AMOUNT PAID FOR THE GOODS ORDERED AND SHIPPED HEREUNDER.</p> | | |
| | | | | TOTAL VALUE | \$877.80 |

Donothy Matyja



57 LE MOYNE - MELROSE PARK, IL 60160

INVOICE NUMBER 1565
INVOICE DATE 05/13/88
DIVISION 09

99

SOLD TO: 63195000

SHIP TO:

REXNORD CORPORATION
2400 CURTIS ST.
OWNERS GROVE, IL 60515

| | | |
|-------------------|----------------------|--------|
| SALES MGR | TYPE | DAC |
| P.O. NUMBER | OTHER INV. REF | |
| SHIP VIA | WAREHOUSE | 198 |
| SHIP DATE | TERMS | NET 30 |
| SALESPERSON | DUE DATE | |
| | MANIFEST # | |
| | CONTROL # | |

| QUANTITY | PRODUCT NAME | PROD. # | YR/APP. # | QTY SHIP | UNIT PRICE | EXT. AMOUNT |
|----------|---|---------|-----------|----------|------------|-------------|
| 2 DRS | VIRGIN TRICHLOROETHYLENE (REXNORD PT. #135736) | 1312 | | 1320 Lbs | .6650/LB | 877.80 |

REXNORD BEARING DIV. SUP. DEPT.
INVOICE # 1565-1019

METER GALLONS
ON BULK DELIVERY

WE HEREBY CERTIFY THAT THESE GOODS WERE
ANALYZED & OF REGULATIONS AND ORDINANCE OF

000059

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 810-358-5800

DETREX CORP.
(NAME OF CARRIER)

DATE _____

TO:
COSIGNEE
STREET
DESTINATION
ORDER#

1000 S 300
DETREX CORPORATION
1000 S 300
DETREX CORPORATION

FROM:

Detrex
Corporation

2537 LE MOYNE
ROSELAND PARK, N.J. 07068

| No. Shipping Unit | Container | HM | Description of Articles <small>(IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME)</small> | Hazard Class | LD Number | Packing Group | WEIGHT <small>(Weight in Commodity)</small> |
|-------------------|-----------|----|---|--------------|-----------|---------------|--|
| 1 | DRUM | | 100% TRICHLOROETHYLENE NON-FLAMMABLE LIQUID | 3.1 | | | 3000 |

| | | |
|---|--|--|
| <p>Note-Where the rate is dependent on the value shippers are required to state specifically in writing the agreed or declared value of the property.</p> <p>The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____</p> | <p>Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.</p> <p>The carrier shall not make delivery of this shipment without payment of freight and all other charges.</p> <p style="text-align: right;"><small>Signature of Consignor</small></p> | <p>FREIGHT CHARGE</p> <p>DRIVER INITIALS _____</p> <p><input checked="" type="checkbox"/> Prepaid <input type="checkbox"/> Collect</p> |
|---|--|--|

RECEIVED subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described apparent good order except as noted (contents and condition of contents packages unknown), marked consigned, and destined as indicated above a carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, it is mutually agreed each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

| | | | |
|--------------------------|--------------------------|--------------------------|--|
| <small>Per _____</small> | PLACARDS REQUIRED | PLACARDS SUPPLIED | <input type="checkbox"/> YES <input type="checkbox"/> NO - Furnished by carrier <small>Driver's Signature</small> |
|--------------------------|--------------------------|--------------------------|--|

| | |
|-----------------------------|-------------------------------|
| SHIPPER: DETREX CORPORATION | AGENT |
| PRINT & SIGN D. COOK | PRINT & SIGN _____ DATE _____ |



Rex Bearing Division
2400 Curtiss Street
Carter No. 1482
Downers Grove, IL 60515-0722
630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK
MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

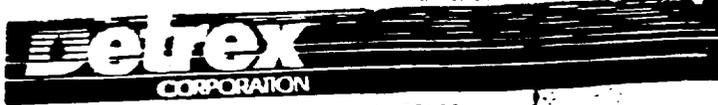
VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE | |
|---------------|----------|------------|--------------------|-------|----------------------|------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUARED IN PLANT BY | FORM |
| | | | | | | |

27

Scotty J. Matyja



2537 Le Moyne - Meirose Park, IL 60160
PHONE (708) 345-3806 FAX (708) 345-3908

INVOICE NUMBER: 28357
INVOICE DATE: 090898
DIVISION: 09

99

SOLD TO 53195000

SHIP TO:

REXNORD CORPORATION
2400 CURTISS ST.
LOWNERS GROVE, IL 60518

| | | | |
|------------------|-----------|---------------------|--------|
| SALES MGR..... | | TYPE..... | DAC |
| P.O. NUMBER..... | WE 189440 | OTHER INV. REF..... | |
| SHIP VIA..... | OUR TRK | WAREHOUSE..... | 198 |
| SHIP DATE..... | 9/8/98 | TERMS..... | NET 30 |
| SALESPERSON..... | 3850 | DUE DATE..... | |
| | | MANIFEST #..... | |
| | | CONTROL #..... | |

| QUANTITY | PRODUCT NAME | PROG. # | YR/APP. # | OFF SHIP | UNIT PRICE | EXT AMT |
|----------|--------------------------|---------|-----------|----------|------------|---------|
| 2 DRMS | VIRGIN TRICHLOROETHYLENE | 1312 | | 1320 LBS | .6650/LB | 877.80 |

REXNORD BEARING DIV. DEPT
AIR CENTER

METER GALLONS
OR BULK DELIVERY

DEGREES FARENHEIT

WE HEREBY CERTIFY THAT THESE GOODS
ARE SHIPPED IN ACCORDANCE WITH THE
AMENDMENT 8 OF REGULATIONS AND ORDINANCES

000053

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 810-359-5800

(248) 799-5820

DETREX CORP. DATE 3/2/90
 [NAME OF CARRIER]

TO: 55195000
 COSIGNEE REXNORD CORPORATION
 STREET 2400 CURTISS ST.
 DESTINATION BOWNERS DRIVE, IL 60115
 ORDER# #2239440

FROM: 
 2537 LE MOYNE
 MELROSE PARK, IL 60150

| No. Shipping Unit | Container | HM | Description of Articles <small>(IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME)</small> | Hazard Class | ID Number | Packing Group | WEIGHT <small>(Gross Net Cont. Weight)</small> |
|-------------------|-----------|----|---|--------------|-----------|---------------|---|
| 2 | DRUMS | X | KG. TRICHLOROETHYLENE (VIRGIN) | 6.1 | UN1710 | III | GROSS NET 500 |

CONSIGNEE SIG *[Signature]* DATE 3-3-90

Note-Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.
 The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
 The carrier shall not make delivery of this shipment without payment of freight and all other charges.

(Signature of Consignor)

FREIGHT CHARGE
 DRIVER D.B.
 Prepaid Collect

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described apparent good order, except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above by carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, it is mutually agreed each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of issue.
 Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named carriers are properly classified, described, certified, marked and labeled and are in proper condition for transportation, according to the applicable regulations of the Department of Transportation.
 Per *[Signature]*

YES NO - Furnished by carrier
 Driver's Signature: _____

SHIPPER: DETREX CORPORATION
 PRINT & SIGN D. COOK - *[Signature]*

AGENT _____
 PRINT & SIGN _____
 DATE _____



2537 Le Moyne - Melrose Park, IL 60160
 PHONE (708) 345-3805 FAX (708) 345-3903
 SOLD TO: 63195000

Reynold Corporation
 2400 Curtiss St.
 Downers Grove, IL 60115

INVOICE NUMBER: 28715
 INVOICE DATE: 021199
 DIVISION: 08-
 SHIP TO:

SALESNOGR WR-195369
 P.O. NUMBER OUR TRACK
 SHIP VIA 2-11-99
 SHIP DATE 4152
 SALESPERSON

TYPE JAB
 OTHER INV. REF 198
 WAREHOUSE
 TERMS NET 30
 DUE DATE
 MANIFEST #
 CONTROL #

| QUANTITY | PRODUCT NAME | PROD # | W%/APP # | QTY SHIP | UNIT PRICE | EXT AM |
|----------|----------------------------|--------|----------|----------|------------|--------|
| 2 Drums | Virginia Trichloroethylene | 1312 | | 1320 Lbs | 655075 | 877.1 |

REYNOLD BELONGS TO REYNOLD
 AP VCHR 24
 REC'D
 11/1/99
 045-02

NET WEIGHT
 OR GROSS WEIGHT



000050

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 810-358-5900

1348 754-3500

DATE _____
(NAME OF CARRIER)

TO:
DESIGNEE
STREET
DESTINATION
ORDER#

95000
Remora Corporation
4440 S. ...
...
48-18800

FROM:



2537 Le Moyne
Melrose Park, IL 60160

| No. Shipping Unit | Container | HM | Description of Articles (IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME) | Hazard Class | IO Number | Packing Group | WEIGHT (Subject to Carrying) |
|-------------------|-----------|----|--|--------------|-----------|---------------|---------------------------------|
| 1 | 42 LIS | | RD, trichloroethylene (Vial in. Rexmont. Pt. - - 2357.10) | | | | 122.00 KGS |

Consignee Sig. _____ Date _____

Note-Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____

Subject to Section 7 of the conditions of this shipment is to be delivered to the consignee without recourse on the consignor. The consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other charges.

Signature of Consignor: _____

FREIGHT CHARGES

Driver Initials _____

Prepaid Collect

RECEIVED: Subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described as apparent good order, except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above will be carried by the carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions and hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named articles are properly marked, described, packaged, marked and boxed and are in proper order for transportation according to the regulations of the Department of Transportation.

PLACARDS REQUIRED

PLACARDS SUPPLIED

YES NO - Furnished by carrier
Driver's Signature _____

SHIPPER: DETREX CORPORATION

AGENT

PRINT & SIGN: D. Cook -

PRINT & SIGN

DATE

11111111

ACCOUNTING FILE

NO.

Rex Bearing Division
2400 Curtiss Street
Caller No. 1482
Downers Grove, IL 60515-0722
630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

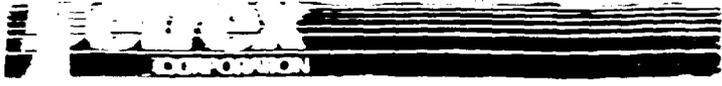
| ITEM | QUANTITY | UOM | DESCRIPTION | PRICE | REQUIRED BY PLANT BY | PROMISE D. |
|------------|----------|-----|--|---------|-------------------------|---------------|
| | | | <p>FOR THE ABOVE ORDER NO. 11111111 ALL DELIVERIES MUST BE MADE BETWEEN 7:00AM AND 12:00PM MONDAY THROUGH FRIDAY (NO DELIVERY ON SATURDAY)</p> | | | |
| P.O. VALUE | | | | 8877.80 | | |

3230

API ELK AP. CHUB

Merry Joy

435736



2507 De Motte Ave. Westport Park, NJ 08160
 PHONE 708 346-0606 FAX 708 346-0900

NO. OF INVOICES
 NO. OF DATES
 DIVISION

SOLD TO

S-P TO

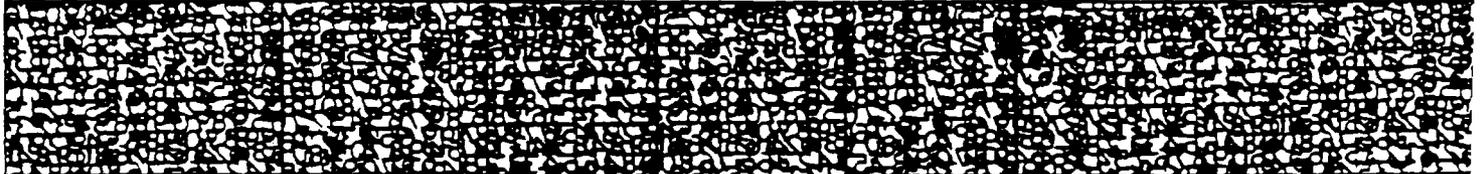
| | |
|-------------|---------------------|
| SALES MGR | TYPE |
| P.O. NUMBER | OTHER INV REF |
| SHIP VIA | WAREHOUSE |
| SHIP DATE | TERMS NET 30 |
| SALESPERSON | DUE DATE |
| | MANIFEST # |
| | CONTROL # |

| QUANTITY | PRODUCT NAME | PROD # | Y%/APP # | QTY SHIP | UNIT PRICE | EXT AMT |
|----------|--------------|--------|----------|----------|------------|---------|
|----------|--------------|--------|----------|----------|------------|---------|

REMIT TO: DEPT 44234
 REXNORD BEARING DIV AP DEPT
 DETROIT MI 48234
 P.O. BOX 2035
 DETROIT MI 48234
 RECD JUL 30 1999
 JUL 26 1999
 VENDOR # 065-825
 TERMS CODE # DUE DATE
 TERMS CODE 1 DUE DATE

METER GALLONS _____ x _____ = _____ LBS.
 _____ DEGREES FAHRENHEIT FOR THE DAY

| | |
|------------|-------|
| SUBTOTAL : | 877.0 |
| TAX : | 68.0 |
| PAYMENT : | |
| TOTAL : | 945.0 |



WE HEREBY CERTIFY THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH ALL APPLICABLE REQUIREMENTS OF SECTIONS 6, 7 & 12 OF THE FAIR LABOR STANDARDS ACT AMENDED & OF REGULATIONS AND ORDERS OF THE ADMINISTRATOR OF THE WAGE & HOUR DIVISION ISSUED UNDER SECTION 14 THEREOF

BILL OF LADING

24 HOUR EMERGENCY RESPONSE # 248-799-3820

Retrex Corporation
[NAME OF CARRIER]

DATE 7/12/97

TO:
COSIGNEE
STREET
DESTINATION
ORDER#

03195000
Kendall Corporation
2406 Curtiss St.
Downers Grove, IL 60515
W 4201574

FROM:

2537 LE MOYNE
MELROSE PARK, IL 60160
(708) 345-3806
FAX: (708) 345-3903
(800) 486-3806

| No. Shipping Unit | Container | HMB | Description of Articles <small>(IF HAZARDOUS MATERIAL, PROPER SHIPPING NAME)</small> | Hazard Class | ID Number | Packing Group | WEIGHT <small>(Weight in Correct Unit)</small> |
|-------------------|-----------|-----|---|--------------|-----------|---------------|---|
| 1 | DRUMS | A | RU, Trichloroethylene (Virgin) | 6.1 | UN1710 | III | Gross 140 <u>1320</u> |

Consignee Sig. *[Signature]* Date 7-12-97

Note-Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of this shipment without payment of freight and all other charges.

(Signature of Consignor)

FREIGHT CHARGES

Driver: R.P.

Prepaid Collect

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described and apparent good order, except as noted (contents and condition of contents packages unknown), marked, consigned, and destined as indicated above which carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agree to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the said terms and conditions hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above named material are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Per *[Signature]*

HAZARDOUS MATERIALS
 HAZARDOUS SOLID B

YES NO - Furnished by carrier
 Driver's Signature: _____

SHIPPER: DETREX CORPORATION

PRINT & SIGN D. Cook - *[Signature]*

AGENT

PRINT & SIGN

DATE _____

Rex Bearing Division
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MUST APPEAR ON ALL INVOICES, PACKING SLIPS, PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT TAXABLE | U.S. NO. RESALE NO. | TERMS | VALUE |
|---------------|----------|-----------------------|---|-------|-------------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY |
| | | | <p> BEARING DIVISION 2400 CURTISS STREET DOWNERS GROVE, ILL. 60515-0722 TEL: 630/969-1770 FAX: 630/969-8827 </p> | | |

[Handwritten signature]
 7/25/14

WI
 H31705



2537 LE DYNE - MELROSE PARK, IL 60160

INVOICE NUMBER: 27592
INVOICE DATE: 9-24-97
DIVISION: 33

SOLD TO: 63195000

SHIP TO:

REXNORD CORPORATION
2400 CURTISS ST.
DOWNS GROVE, IL 60515

6003931

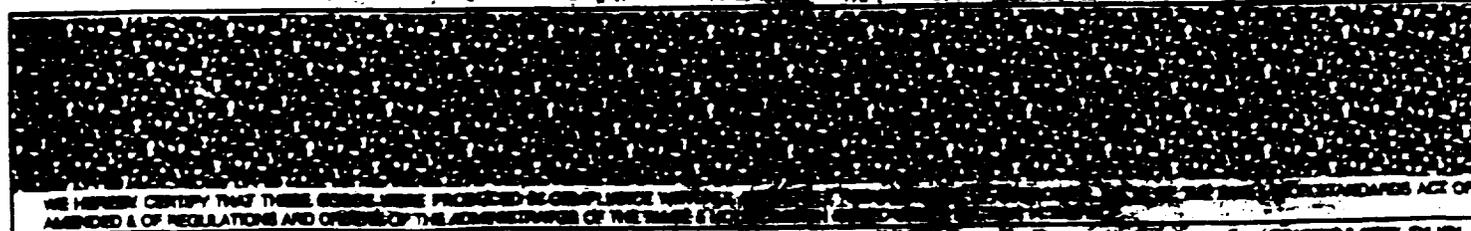
| | | | |
|-------------------|----------------------------|----------------------|--------|
| SALES MGR | | TYPE | UAC |
| P O. NUMBER | 926009 | OTHER INV. REF | |
| SHIP VIA | JUR TRK | WAREHOUSE | 198 |
| SHIP DATE | 9-24-97 9-24-97 | TERMS | NET 30 |
| SALESPERSON | 9350 | DUE DATE | |
| | | MANIFEST # | |
| | | CONTROL # | |

| QUANTITY | PRODUCT NAME | PROD. # | Y%/APP # | QTY SHIP | UNIT PRICE | EXT AMT |
|----------|--------------------------|---------|----------|----------|------------|---------|
| 2 DMS | VIRGIN TRICHLOROETHYLENE | 1312 | | 1320 LBS | .5650/LB | 877 |

REXNORD BEARING DIV AP DEPT
 AP VCHR 24- 1014069
 RECD OCT 07 1997
 VENDOR # 066-827
 TERM CODE 1 DUE DATE

METER GALLONS
ON BULK DELIVERY

DEGREES FAHRENHEIT FOR THE OIL



WE HEREBY CERTIFY THAT THESE GOODS WERE PRODUCED IN COMPLIANCE WITH THE FEDERAL AND STATE REGULATIONS AND ORDINANCES OF THE ADMINISTRATION OF THE TIME & PLACE OF MANUFACTURE.

000062

CUSTOMER DUPL

DETREX
(Name of Carrier)

Date 11-17-77

Company
Address
Destination
Order #

FROM:

Detrex

207 W. BOYD
BELROSE PARK, U. GULF

| UNIT | CLASS | HAZARDOUS MATERIAL PROPER SHIPMENT NAME | WT | HT | GRDS | VAL |
|------|-------|---|----|----|------|-----|
| | | | | | | |

Note: When the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not less than:

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other charges.

FREIGHT CHARGES

SHIPPER'S INITIALS J.S.A.

Prepaid

Collect

(Signature of Consignor)

SHIPPER: Subject to the conditions and liability limitations set forth on the date of the issue of the Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages indicated), packed, consigned and delivered as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination if it is made, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over any part of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification of the used terms.

Accepted by the shipper and accepted for himself and his assigns

Shipper certifies that the above named materials are properly classified, described, packaged, marked, labeled and are in proper condition for transport according to the applicable regulations of the Department of Transportation.

PLATEAU
REQUIREMENT

YES NO - FURNISHED BY CARRIER

SHIPPER'S SIGNATURE:

DETREX Corporation

AGENT
PER

MEMORANDUM COPY

4

Rex Bearing Division
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING NO.

MUST APPEAR ON ALL INVOICES, PACKING SLIPS, PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT TAXABLE | ILLINOIS RESALE NO. | TERMS | VALUE |
|---------------|----------|-----------------------|---------------------|-------|-------------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY |
| | | | | | |

Lonny J. Matyja

COLEMAN

CHEMICAL
INC.

INVOICE

3623
REXIN

Remit To P.O. Box 2838, East Aurora, Illinois 61611
309-674-6144

CUSTOMER NO

815 467 1777
Kara Clay

23247
West Co
Chana

BILL TO:
Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

SHIP TO:
Rexnord Corporation
2324 Curtiss street
Downers Grove, IL 60515

60

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|--|---------------------|----------|------------|----------|---|----------------------|------------------|
| 11/13/97 | | | | | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER |
| 2000 | | | 11/13/97 | | JEFF PHILLIPS | | None |
| QUANTITY REQUIRED | QUANTITY SHIPPED | | UNIT/WT | ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT |
| | | | | | | | |
| 1.00 | 1.00 | 0 | EA | 9401556 | WASTE TRICHLOROETHYLENE STREAM 9401556 PICKED UP ON MANIFEST #1 J642308 | 265.0000 | 2 |
| <p><i>Returned to Coleman Attn: Kara Clay</i></p> <p><i>Ru</i></p> | | | | | | | |
| | | | | | | 000065 | |
| | | | | | | Non-taxable Subtotal | 2 |
| | | | | | | Taxable Subtotal | |
| | | | | | | Tax | |
| | | | | | | Total | 2 |

*This
PAG*



INTEREST: Coleman Chemical Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per annum compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive the exercise the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchasers will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in accordance with the requirements of the Fair Lead Standards Act of 1936, as amended. Seller shall retain title to returned drums. Drums are to be paid for in full, as invoiced, and full refund will be made promptly. Drums are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The drums returned must be the same originally shipped, and show no evidence of abuse or use for purposes other than the storage of original contents. No cash discounts will be allowed on drums. Shipping taxes, or any additional taxes, levied by any governmental authority, on products herein referred shall be for account of buyer.

NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WAREHOUSE OR RAILROAD DEPOT

COLEMAN

CHEMICAL
CO

INVOICE

Remit To: P.O. Box 2036, East Peoria, IL 61611
(815) 467-1777

CUSTOMER NO

BILL TO

REXNORD, INC

SHIP TO

REXNORD, INC

4400 CURTISS STREET
DOWNERS GROVE, IL 60515

2400 CURTISS STREET
DOWNERS GROVE, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|-----------------------|------------------|-------------|----------|--------------------------------------|------------|------------------|--|
| | | COLEMAN TRY | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | |
| 100-170300 | | 06/26/97 | | M | | 36608 | |
| REQUIRED | QUANTITY SHIPPED | UNIT/WT | ITEM NO | DESCRIPTION | UNIT PRICE | AMOUNT | |
| 10000 | 10000 | LB | 82006400 | PERCHLOROPHTYLENE (PPG) U.D. DRUM | 0.0004 | 4000.00 | |

REXNORD BEARING DIV AP DEPT
AP VCHR 24- 109006
REC'D JUL 3 1997
VENDOR # 065-825
TERMS COUET DUE DATE

000066

| | |
|----------------------|---------|
| Non-Parable Subtotal | 4000.00 |
| Parable Subtotal | 4000.00 |
| Tax (7.5000 %) | 300.00 |
| Total | 4300.00 |



NACD
Responsible
Distribution
Process

Documentation Verification
Assessment 1995

INTEREST: Coleman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per annum, compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision upon one or more occasions shall not waive the right exercised the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchasers will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to returned drums. Drums are to be paid for in full, as invoiced, and full refund will be made promptly provided drums are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The drums returned must be the same originally shipped, and show no evidence of abuse or use for purposes other than the storage of original contents. No cash discount will be allowed on drums. Existing taxes, or any additional taxes, levied by any governmental authority, on products herein named shall be for account of Buyer.

TRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

| | | | |
|---------------------------------------|---------------|------------------|---------------|
| NAME OF CARRIER COLEMAN TRK | CARRIER'S NO. | DATE 06 15 97 | SHIPPER'S NO. |
|---------------------------------------|---------------|------------------|---------------|

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TERMS IN EFFECT ON THE DATE OF THE ISSUE OF THIS BILL OF LADING THE PROPERTY DESCRIBED BELOW IS APPEARING GOOD ORDER EXCEPT AS NOTED. CONTENTS AND CONDITION OF CONTENTS OF PACKAGES UNLESS MARKED, CONSIGNED AND DESIGNATED AS INDICATED BELOW WHICH SAID CARRIER (THE WORD CARRIER BEING UNDERSTOOD THROUGHOUT THIS CONTRACT AS MEANING ANY PERSON OR CORPORATION IN POSSESSION OF THE PROPERTY UNDER THE CONTRACT) AGREES TO BE RESPONSIBLE FOR DELIVERY AT SAID DESTINATION. (1) ON ITS ROUTE, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION. IT IS MUTUALLY AGREED AS TO EACH CARRIER OF ALL OR ANY OF SAID PROPERTY OVER ALL OR ANY PORTION OF SAID DESTINATION AND AS TO EACH PARTY AT ANY TIME INTERESTED IN ALL OR ANY OF SAID PROPERTY THAT EVERY SERVICE TO BE PERFORMED HEREUNDER SHALL BE SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC STRAIGHT BILL OF LADING OR THE UNIFORM FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREOF. IF THIS IS A "LET" OR A "FOR-WATER SHIPMENT" OR (2) IN THE APPLICABLE MOTOR CARRIER CLASSIFICATION OF TARIFF. THIS IS A MOTOR CARRIER SHIPMENT. SHIPPER HEREBY CERTIFIES THAT HE IS AWARE OF THE TERMS AND CONDITIONS OF THE SAID BILL OF LADING, INCLUDING THOSE ON THE BACK THEREOF, SAID FORM IN THE CLASSIFICATION OF TARIFF WHICH GOVERNS THE TRANSPORTATION OF THIS SHIPMENT, AND THE SAID TERMS AND CONDITIONS ARE HEREBY AGREED TO BY SHIPPER AND ACCEPTED BY CARRIER AND HIS ASSIGNS.

| | | | |
|---|----------|--|-------------|
| FROM: COLEMAN CHEMICAL INC. 23247 W. Eames (U.S. Rt. 6) • Channahon, IL 60410 (815) 467-1777 | SHIPPER: | TO: REINORD, INC CONSIGNEE 2400 CURTISS STREET DOWNERS GROVE, IL 60515 | DESTINATION |
|---|----------|--|-------------|

| | | |
|--|-------|----------------|
| DELIVERING CARRIER COLEMAN TRK | ROUTE | VEHICLE NUMBER |
|--|-------|----------------|

| NO. PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT SUBJECT TO COMM. | CLASS OR RATE | CHARGE FOR CARRIER |
|--------------|----|--|-------------------------|---------------|--------------------|
| 1 | | TRICHLOROETHYLENE. 5.11, UN 1710, PG III USE NAERG GUIDE #160 3200660N TRICHLOROETHYLENE (PPG) N.D. Net weight: 1320.00 LB | 1380 LB | | |
| 2 | | <i>as shown</i> Total Gross Wt. = | 1380 LB | | |
| | | RECEIVING HRS 7 - 2:30. CUSTOMER HAS A DOCK. <u>DELIVER 6/30/97</u> PO#WE-172320 | | | |

| | | | |
|--------------|-----------------------------------|----------------|--|
| RECEIVED BY: | COLEMAN DRIVER: <i>Karl...</i> | C.O.D. Amt. \$ | C.O.D. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|--------------|-----------------------------------|----------------|--|

| | | | |
|--|--|---|--|
| * If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. Shipper's weight in case of stowage, not a part of bill of lading approved by the Interstate Commerce Commission. | NOTE—where the rate is dependent on weight, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding | Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other charges. | TOTAL CHARGES \$ Freight charges are PREPAID unless <input type="checkbox"/> Check box if charges are MSOS RECEIVED |
|--|--|---|--|

| | | | |
|---------------------------|--|--|---|
| BULK HOOP, UP OR DOWN BY: | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. PER <i>[Signature]</i> | FOR EMERGENCY ASSISTANCE INVOLVING HAZARDOUS CHEMICALS CALL CHEMTREC 800-424-9300 DAY OR NIGHT |
|---------------------------|--|--|---|

Hex Bearing Division
 2400 Curmiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING NUMBER

MUST APPEAR ON ALL INVOICES PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO. | TERMS | VALUE | |
|---------------|----------|------------|---------------------|-------|----------------------|------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY | FROM |

258330

Carroll Whitely

COLEMAN

CHEMICAL
NC

INVOICE

38474

REXIN

Remit To: P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO

BILL TO

REXNORD, INC.

2400 CURTISS STREET
DOWNERS GROVE, IL 60515

SHIP TO

REXNORD, INC.

2400 CURTISS STREET
DOWNERS GROVE, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|-----------------------|---------|-------------|------------|-----------|---|-------------|------------------|
| 05/02/97 | | COLEMAN TRK | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER |
| WB-169876 | | | 04/29/97 | | 19 | | 35370 |
| QUANTITY | REORDER | SHIPPED | UNITS | ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT |
| 1320.00 | 1320.00 | 0 | LB | 12006609 | TRICHLOROETHYLENE (PPE) B.B. 2 - 100 NBF | 0.0000 | 1,056. |

REXNORD BEARING DIV AIR DEPT
AP VCHR 24- 051741
RECD MAY 7 1997
VENDOR # 065-825
TERMS CODE 1 DUE DATE

NACD
Non-hazardous
Disposal
Chemicals

000069

Reproducible Substrate 0.
Reproducible Substrate 1,056.
Total 1,135.

INTEREST: Coleman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at SEVENTEEN PERCENT (17%) per annum, or provided monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to comply with these provisions, upon one or more occasions, shall not waive the right to charge the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own acts, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to merchandise shown. Goods are to be paid for in full, as ordered, and full payment will be made promptly. Goods if are returned to original point of shipment within one year from date of invoice. Seller's freight charges to be prepaid. The driver returned must be the same originally shipped, and show no evidence of abuse, or use for purposes not those the storage of original contents. No cash discount will be allowed on credit, existing terms, or any additional terms, stated by any governmental authority, or products made known shall be for account of buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEASES ALLOWED AFTER DELIVERY IS MADE IN CONNECTION TO WAREHOUSE OR DELIVERY POINT.

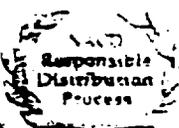
| | | | |
|---------------------------------------|--------------|-------------------------|------------------------------|
| NAME OF CARRIER COLEMAN TRK | CARRIER'S NO | DATE 04/29/97 | SHIPPER'S NO 55370 |
|---------------------------------------|--------------|-------------------------|------------------------------|

RECEIVED subject to the classifications and terms in effect on the date of the issue of this Bill of Lading. The property described below is apparent gross weight except as noted. Contents and condition of contents of packages are not marked, consigned and designated as indicated below which said carrier, the vessel carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract, agrees to 15 days' period of delivery at said destination. If an inland shipment is delivered to another carrier on the route to said destination, it is mutually agreed as to each carrier of all or any of said property under all or any portion of the transportation and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading and the Uniform Freight Classification in effect on the date hereof. If this is a bill of a raw-water shipment, or 2) in the applicable motor carrier classification of tariff. This is a motor carrier shipment. Shipper hereby certifies that he is aware of the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification of tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to, signed and accepted for transport and his consignee.

| | |
|---|---|
| FROM: COLEMAN CHEMICAL LLC Joliet, Illinois 60435 (815) 727-3900 | TO: REXWORD, INC. CONSIGNEE 2400 CURTISS STREET DOWNERS GROVE, IL 60515 |
| SHIPPER: | DESTINATION |

| | | |
|--|------------------------|----------------|
| DELIVERING CARRIER COLEMAN TRK | ROUTE 44 114 | VEHICLE NUMBER |
|--|------------------------|----------------|

| NO PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CODE) | CLASS OR RATE | CHARGE FOR CARRIER |
|---|----|---|--------------------------|---------------|--------------------|
| 2 | | TRICHLOROETHYLENE, 5.1. UN 1710, PG III USE NABRG GUIDE #160 8200660N TRICHLOROETHYLENE (PPG) N.D. Net Weight: 1320.00 LB | 1380 LB | | |
| Total Gross Wt. = | | | 1380 LB | | |
| RECEIVING HRS 7 - 2:30 DELIVER 5/2/97 PO#WE-169876. CUSTOMER HAS A DOCK | | | | | |



Documentation Verification Assessment 1995



| | | | |
|-----------------------------|---------------------------------------|----------------|--|
| RECEIVED BY: <i>Snow</i> | COLEMAN DRIVER: <i>Paul Oshing</i> | C.O.D. Amt. \$ | C.S.B. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|-----------------------------|---------------------------------------|----------------|--|

* If the shipment moves between two ports by a carrier by vessel, the law requires that the bill of lading shall state whether it is carrier's or shipper's receipt.
Shipper's receipt in law of receipt, not a part of Bill of Lading approved by the Interstate Commission.

NOTE—Where the risk is determined on vessel, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not receive delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES \$

Freight charges are PREPAID unless:
 Check box if charges are

| | | | |
|-----------------------|--|---|---|
| BULK HOOD-UP OK'D BY: | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above named references are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Interstate Commerce Commission. | FOR EMERGENCY ASSISTANCE INVOLVING HAZARDOUS MATERIALS CALL: CHEMTREC 800-424-9300 DAY OR NIGHT |
|-----------------------|--|---|---|

Rexnord Corporation
 2400 Curiss Street
 Caller No: 1482
 Dowders Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

No.

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

DATE OF ORDER BUYER TAX EXEMPT ILLINOIS RESALE NO TERMS VALUE

TAXABLE

ITEM QUANTITY PUM DESCRIPTION PRICE REQUIRED IN PLANT BY FROM

282530

24

Corothy M. Matija

433706

000071

COLEMAN

CHEMICAL
NC

INVOICE

4225

REXN

Remit To P.O. Box 2838, East Peoria, Illinois 61611
309-674-6144

CUSTOMER NO

BILL TO:

Rexnord Corporation
480 Curtiss street
Downers Grove, IL 60515

SHIP TO:

Rexnord Corporation
2324 Curtiss street
Downers Grove, IL 60515

| DATE | SHIP VIA | F.O.B. | TERMS | | |
|-----------------------|------------|---------------|---|--------|--------|
| 03/21/97 | | | Net 30 Days | | |
| PURCHASE ORDER NUMBER | ORDER DATE | SALESPERSON | SHIP ORDER NUMBER | | |
| Verbal | 03/21/97 | JEFF PHILLIPS | | | |
| QUANTITY | UNIT | ITEM NO. | DESCRIPTION | PRICE | AMOUNT |
| 1.00 | 1.00 | 918922 | DATE POLYCHLOROPHTYLENE PICKED UP ON MARCH 21 BY J 74653 | 00.000 | 00.00 |

| | |
|------------------------|---------------------|
| BEARING ACCT. | RAY. CRT. PROCESSED |
| RELATE TO PURCHASE NO. | REFERENCE NUMBER |
| | 24-0412013 |
| REQ. CODE | APPROVAL |
| QTY. REQ. | 1 |
| QTY. SUP. | 1 |
| QTY. DEL. | 1 |
| QTY. RET. | 1 |

065-973

RECEIVED

MAR 25 1997

REXNORD CORPORATION
REPAIRING OPERATION

000072

WARRANTY: Coleman Chemical Inc. shall charge, and Performance shall be, limited to any and all materials which shall be used in the manufacture of the product. The amount of the charge shall be the amount of the material used in the manufacture of the product. The amount of the charge shall be the amount of the material used in the manufacture of the product. The amount of the charge shall be the amount of the material used in the manufacture of the product.

COLEMAN

CHEMICAL
CO.

INVOICE

SECTION

Remit To P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO

BILL TO REYNORD, INC.

SHIP TO REYNORD, INC.

2400 CURTISS STREET
DOWNERS GROVE, IL 60515

2400 CURTISS STREET
DOWNERS GROVE, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|-----------------------|---------|------------|----|-------------|---|------------------|----------|
| 02/10/97 | | | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | |
| WZ-1661 | | 01/31/97 | | 19 | | 33529 | |
| QUANTITY | | ITEM NO. | | DESCRIPTION | | UNIT PRICE | |
| ORDERED | SUPPLY | UNIT | | | | | AMOUNT |
| 1320.00 | 1320.00 | 9 | LD | 02006608 | TRICHLOROETHYLENE (TFC) S.D. 2 - 800 BBL | 0.1000 | 1,029.60 |

0218050

065-825

000073



MACO
Responsible
Distribution
System

02006608
Communication Validation
Agreement 1995

REYNORD CORP. 0000000000

NET KING OPERATIONS

Unfavorable Subtotal: 0.00

Favorable Subtotal: 1,029.60

TAX (6.500%) 66.42

TOTAL: 1,096.02

INTEREST: Coleman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any part of balance not paid within 30 days (30 days of invoice). Interest shall be charged at SEVENTEEN PERCENT (17%) per annum, non-accruing monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, even one or more occasions, shall not waive the right to exercise this same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own acts, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall remain liable to relevant authorities. Goods are to be paid for in full, as invoiced, and full release will be made promptly, provided all are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The driver's interest must be the same originally shipped, and show as evidence of return, or use for purposes other than the storage of original contents. No cash discount will be allowed on credit, including terms, or any additional terms, unless by any governmental authority, as provided herein shall be for account of buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WHOLESALE OR RETAILER.

Bernard Corporation
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 630/969-1770 FAX: 630/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MAY BE

MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

DATE OF ORDER BUYER TAX EXEMPT TAXABLE ILLINOIS RESALE NO. TERMS VALUE

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED BY | PLANT BY | PROMISED |
|------|----------|-----|------------------------------|---------|-------------|----------|----------|
| | | | <p>282530</p> <p>0218050</p> | \$10.29 | | | |

AP1 ELK AP2 SUB

Dorothy Matys

H35726

SHIPPER'S VC

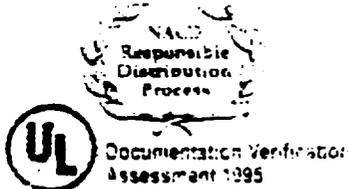
| | | |
|-----------------|--------------|-----------------------|
| NAME OF CARRIER | CARRIER'S NO | SHIPPER'S VC 33529 |
|-----------------|--------------|-----------------------|

RECEIVED (subject to the classifications and terms in effect on the date of the issue of this bill of Lading) the property described herein in apparent good order except as otherwise indicated and delivered to the consignee at the destination and to each party as may be interested in all or any of said property, the carrier being understood throughout this contract as assuming any liability for loss of or damage to the property under the contract of carriage, and as to each party as may be interested in all or any of said property, the carrier is hereby agreed, as to each carrier on all or any of said property, that it is subject to the Uniform Freight Classification in effect on the date hereof, and that it is a rate of a rate-maker agreement, or (2) in the applicable motor carrier classification of LTR if this is a motor carrier agreement. Shipper hereby certifies that he is aware of the terms and conditions of the said bill of Lading, including those on the back hereof set forth in the classification or term which governs the transportation of the property, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

| | | | |
|---|----------|---|-------------|
| FROM: COLEMAN CHEMICAL LLC Joliet, Illinois 60435 (815) 727-3900 | SHIPPER. | TO: Rexnord, Inc. CONSIGNEE 2400 Curtiss Street Downers Grove, IL 60515 | DESTINATION |
|---|----------|---|-------------|

| | | |
|--------------------|-------|----------------|
| DELIVERING CARRIER | ROUTE | VEHICLE NUMBER |
|--------------------|-------|----------------|

| NO. PACKAGES | NO. | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO COM) | CLASS OR RATE | ✓ | CHARGES FOR CARRIER USE |
|--|-----|---|-------------------------|---------------|---|-------------------------|
| 2 | X | TRICHLOROETHYLENE, 6.1, UN 1710, PG III USE NAERG GUIDE #160 8200660N TRICHLOROETHYLENE (PPG) N.D. Net Weight: 1320.00 LB | 1380 LB | | | |
| Total Gross Wt. = | | | 1380 LB | | | |
| CUSTOMER PO#WE-166129. DELIVER 2/10/97 HRS 7 - 2:30 | | | | | | |



| | | | |
|--|---|---|--|
| RECEIVED BY: <i>[Signature]</i> | COLEMAN DRIVER <i>[Signature]</i> | C.O.D. Amt. \$ | C.O.S. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
| * If the shipment moves between two parts by a carrier by order, the one requires that the bill of lading shall state whether it is carrier's or shipper's receipt. Shipper's receipt in lieu of carrier's bill of lading approved by the Interstate Commerce Commission. | NOTE—Where the rate is dependent on weight, shipment are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by shipper to be not exceeding \$ | Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the equipment, the consignee shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other charges. | TOTAL CHARGES \$ |
| ULX HOOK-UP OK'D | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above named recipient is properly identified, authorized, designated, and is not related and the proper conditions for transportation according to the applicable regulations are met. | Freight charges are PREPAID unless marked <input type="checkbox"/> Check box if charges are Collect. MDS RECEIVED BY 000075 |

COLEMAN

CHEMICAL
INC.

INVOICE

PAGE 15
REZIN

Remit To: P.O. Box 2036, East Peoria, IL 61641
(815) 727-3900

CUSTOMER NO

BILL TO: Rexnord, Inc.

SHIP TO:
Rexnord, Inc.

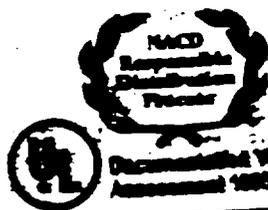
2400 Curtiss Street
Downers Grove, IL 60515

2400 Curtiss Street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | | | |
|-----------------------|--|-------------|------------|-----------|-------------|-------------|--|--------|--------|
| 10/23/96 | | COLEMAN TRK | | DELIVERED | | Net 30 Days | | | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | | |
| WB-161041 | | | 09/16/96 | | 19 | | 30573 | | |
| QUANTITY | | UNITS | | ITEM NO. | | DESCRIPTION | UNIT PRICE | AMOUNT | |
| 1320.00 | | 1320.00 | | 0 LB | | 82006608 | TRICHLOROETHYLENE (TCE) I.S. 2 - NET WT | 0.1000 | 1.0500 |

SEARCHED INDEXED
SERIALIZED FILED
OCT 23 1996
FBI - PEORIA
111

065-825



000076
Inflammable Substanc
Toxic Substanc
Net (6.7000)
Total

INTEREST Coleman Chemical Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within sixty (60) days of invoice. Interest shall be charged at TWENTY PERCENT (20%) per year on the unpaid amount, or the highest interest permitted by law for commercial contracts, whichever is higher, from the date of invoice. Penalties to enforce payment under this provision, upon one or more occasions, shall not waive the obligation to pay the amount due.

WARRANTY All products are sold without warranty of any kind and purchaser will, by their own use, determine suitability of each product for their own use. Seller warrants that all goods covered by this invoice were produced in accordance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall release title to purchaser's goods. Goods are to be used for as sold, as accepted, and full release will be made promptly upon receipt. All products are sold without warranty of any kind and purchaser will, by their own use, determine suitability of each product for their own use. Seller warrants that all goods covered by this invoice were produced in accordance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall release title to purchaser's goods. Goods are to be used for as sold, as accepted, and full release will be made promptly upon receipt. All products are sold without warranty of any kind and purchaser will, by their own use, determine suitability of each product for their own use. Seller warrants that all goods covered by this invoice were produced in accordance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall release title to purchaser's goods. Goods are to be used for as sold, as accepted, and full release will be made promptly upon receipt.

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPER'S NO

| | | | |
|---------------------------------------|--------------|-------------------------|------------------------------|
| NAME OF CARRIER COLEMAN TRK | CARRIER'S NO | DATE 09/16/96 | SHIPPER'S NO 30577 |
|---------------------------------------|--------------|-------------------------|------------------------------|

RECEIVED SUBJECT TO THE CLASSIFICATION AND TERMS IN EFFECT ON THE DATE OF THE ISSUE OF THIS BILL OF LADING THE PROPERTY DESCRIBED HEREIN IS ACCEPTED AND DELIVERED AS SHOWN HEREON UNLESS OTHERWISE SPECIFIED BY THIS BILL OF LADING. THE CARRIER'S LIABILITY IS LIMITED TO THE CARRIER'S TARIFF OR TO THE TARIFF OF THE CARRIER OF LAST RECEIPT OR TO THE TARIFF OF THE CARRIER OF FIRST RECEIPT, WHICHEVER IS MOST FAVORABLE TO THE SHIPPER. THE CARRIER'S LIABILITY IS LIMITED TO THE CARRIER'S TARIFF OR TO THE TARIFF OF THE CARRIER OF LAST RECEIPT OR TO THE TARIFF OF THE CARRIER OF FIRST RECEIPT, WHICHEVER IS MOST FAVORABLE TO THE SHIPPER. THE CARRIER'S LIABILITY IS LIMITED TO THE CARRIER'S TARIFF OR TO THE TARIFF OF THE CARRIER OF LAST RECEIPT OR TO THE TARIFF OF THE CARRIER OF FIRST RECEIPT, WHICHEVER IS MOST FAVORABLE TO THE SHIPPER.

| | | | |
|--|----------|--|-------------|
| FROM: COLEMAN CHEMICAL INC. Joliet, Illinois 60435 (815) 727-3900 | SHIPPER: | TO: CONSIGNEE Reznord, Inc. STREET 2400 Curtiss Street Downers Grove, IL 60515 | DESTINATION |
|--|----------|--|-------------|

| | | |
|--|------------------------|----------------|
| DELIVERING CARRIER COLEMAN TRK | ROUTE 40-118 | VEHICLE NUMBER |
|--|------------------------|----------------|

| NO. PACKAGES | HAZ | KING OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO COM.) | CLASS OR RATE | ✓ | CHARGES FOR CARRIER USE |
|---|-----|---|--------------------------|---------------|---|-------------------------|
| 2 2 | X | TRICHLOROETHYLENE, 6.1, UN 1710, PG III USE NAERG GUIDE #160 82006600 TRICHLOROETHYLENE (PPG) N.D. Net Weight: 1320.00 LB | 1380 LB | | | |
| Total Gross Wt. = | | | 1380 LB | | | |
| Receiving hrs. 7:00-2:30 DELIVER 10/23/96. PO#WE-161041 | | | | | | |
|  UL Documentation Verification Assessment #995 | | | 1106047 | | | |

Page 1 of 1

| | | | |
|--------------|-----------------|---------------------------------|--|
| RECEIVED BY: | COLEMAN DRIVER: | C.O.D. <input type="checkbox"/> | C.S.B. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|--------------|-----------------|---------------------------------|--|

| | | | |
|--|--|---|--|
| <p>* If the shipment moves between two bills by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. Shipper's weight in case of dispute has a part of bill of lading approved by the appropriate Commission.</p> | <p>NOTE—When the bill is delivered on what, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding</p> | <p>Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without release to the consignee, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other charges.</p> <p>(Signature of Consignor)</p> | <p>TOTAL CHARGES \$</p> <p>Freight charges are PREPAID unless noted <input type="checkbox"/> Check box if charges are Cash</p> |
|--|--|---|--|

| | | | |
|--|--|--|------------------|
| BULK MAKE-UP OK'D BY: PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above named contents are properly packaged, secured, marked and labeled and are in proper condition for transportation according to the applicable provisions of the Department of Transportation. | FOR EMERGENCY ASSISTANCE INVOLVING MEDICALS CHEMICALS CALL: CHEMTREC 800-424-9300 DAY OR NIGHT | WMS RECEIVED BY: |
|--|--|--|------------------|

WHITE - OFFICE GREEN - CUSTOMER BLUE - SHIPPING YELLOW - OFFICE

000077

COLEMAN

CHEMICAL
INC

INVOICE

REXN

Remit To P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO

BILL TO:

Rexnord, Inc.

2400 Curtiss Street
Downers Grove, IL 60515

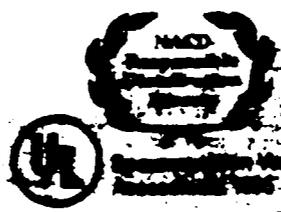
SHIP TO:

Rexnord, Inc.

2400 Curtiss Street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|-----------------------|------|-------------|------------|---|-------------|-------------|-------------------|
| 10/04/96 | | COLEMAN TRK | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | CONE ORDER NUMBER |
| WE-161041 | | | 10/03/96 | | 19 | | 31007 |
| QUANTITY | UNIT | PRICE | ITEM NO. | DESCRIPTION | | UNIT PRICE | AMOUNT |
| 1320.00 | LB | 1.32000 | 82006608 | TRICHLOROSYLENE (TFC) 100% - 100% 2 - 100% TFC | | 1.32000 | 1,756.80 |
| | | | | | | | 1010083 |
| | | | | | | | 065-825 |
| | | | | | | | 000078 |
| | | | | | | | 1,124 |

RECEIVED
OCT 11
REXNORD CO
REF RING



INTEREST: Coleman Chemical Inc. shall charge, and Purchaser agrees to pay, interest on any and all amounts not paid within thirty (30) days of invoice. Interest shall be charged at THREE PERCENT (3%) per annum, or the highest interest permitted by law for commercial transactions, whichever is higher, from the date of invoice. Payment of interest shall be made on the 1st day of each month, and will serve the 1st day of the month immediately.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own fault, determine suitability of such products for their own use. Seller will not be liable for any claims or damages caused by the use of such products unless such products were produced in accordance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall remain liable to return such products. Goods are to be paid for in full, as presented, and full release will be made promptly provided are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The above contained terms apply to all orders shipped, and there is no obligation of return, or use for purposes other than the storage of original contents. No cash discount will be allowed on credit. Shipping, taxes, or any additional terms, listed by any governmental authority, on products herein named shall be for account of buyer and CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WHOLESALE OR RETAIL.

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

SHIPPER'S NO

NAME OF CARRIER: **COLEMAN TRK** CARRIER'S NO: DATE: **10/03/96** 31007

RECEIVED subject to the classifications and terms in effect on the date of the issue of this Bill of Lading. The property described herein is apparent good order except as noted. Contents of packages are not marked, counted and described as indicated herein which said carrier, the vessel carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract, agrees to its usual practice of delivery of said distribution of its goods, unless otherwise specified, to another carrier on the route to said destination. It is mutually agreed that each carrier of all or any of said property shall be subject to the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth in the Uniform Freight Classification in effect on the date hereof. This is a release of liability shipment of 21 in the applicable motor carrier classification of tariff if this is a motor carrier shipment. Shipper hereby certifies that he is aware of the terms and conditions of the said bill of lading, including those set forth herein, as well as the classification of tariff which governs the transportation of the shipment and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his agents.

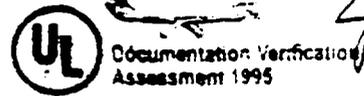
FROM: **COLEMAN CHEMICAL INC.**
 Joliet, Illinois 60435
 (815) 727-3900

TO: **CONSIGNEE** **Reynold, Inc.**
 STREET **2400 Curtiss Street**
Downers Grove, IL 60515

SHIPPER: DESTINATION

DELIVERING CARRIER: **COLEMAN TRK** ROUTE: **41-116** VEHICLE NUMBER:

| NO. PACKAGES | UNIT | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT SUBJECT TO C.O.D. | CLASS OR RATE | CHARGES FOR CARRIER USE |
|---|------|---|--------------------------|---------------|-------------------------|
| 2 | X | TRICHLOROETHYLENE, 6.1, UN 1710, PG III USE NAERG GUIDE #160 8200660N TRICHLOROETHYLENE (PPG) N.D. Net Weight: 1320.00 LB | 1380 LB | | |
| Total Gross Wt. - | | | 1380 LB | | |
| Receiving hrs. 7:00-2:30 DELIVER 10/4/96. PHONE-161041 | | | | | |



[Handwritten Signature]

RECEIVED BY: COLEMAN DRIVER: C.O.D. Amt. \$

* If the agreement between two bills of lading by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's receipt. Shipper's receipt in case of water, not a part of Bill of Lading approved by the Interstate Commerce Commission.

NOTE—Where the risk is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

Shippers to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without payment to the carrier, the carrier shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other usual charges.

(Signature of Consignee)

C.S.S. FEE:
 PREPAID
 COLLECT \$

TOTAL CHARGES \$

Freight charges on PREPAID cannot carry
 Check box if charges are Cash

PLACARDS OFFERED TO CARRIER: YES NO
 ACCEPTED BY CARRIER: YES NO

This is to certify that the above noted materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

FOR EMERGENCY ASSISTANCE INVOLVING HAZARDOUS MATERIALS CALL: CHEMTEC 800-424-6300 DAY OR NIGHT

Hennrich Corporation
2400 Cummins Street
Carter No 1482
Downers Grove, IL 60515-0722
708.969-1770 FAX: 308.969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MUST
MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

DATE OF ORDER BUYER TAX EXEMPT TAXABLE ALL NO'S RESALE NO TERMS VALUE

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | SHIPPED IN PLANT BY | WORK |
|------|----------|-----|-------------|-------|------------------------|------|
| | | | | | | |

1012083

283 30 P.O. VALUE \$1056.00
DNP1 BUK WP2 430B

Dorothy Matyja

HS5708

Remit To: P.O. Box 2838, East Peoria, Illinois
309-674-6144

CUSTOMER NO



REXNORD CORPORATION
BEARING OPERATION

BILL TO: Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

SHIP TO: Rexnord Corporation
2324 Curtiss street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|--|--|-------------|------------|--|---------------|--|------------------|
| 06/25/96 | | | | | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALES PERSON | | OUR ORDER NUMBER |
| Verbal | | | 06/25/96 | | JEFF PHILLIPS | | None |
| QUANTITY | | ITEM NO. | | DESCRIPTION | | UNIT PRICE | AMOUNT |
| 1.00 | | 0 EA 903022 | | WHITE TRICHLOROETHYLENE PICKED UP ON 06/25/96 SI 74651. | | 19.0000 | 19.00 |
| | | | | <div data-bbox="987 874 1555 1151" data-label="Text"> <p>BEARING ACCT. PAY. CRT. PROCESSED REFERENCE NO. 0709081</p> <p>P</p> <p>065973</p> </div> | | | |
| <div data-bbox="889 1559 1133 1757" data-label="Image"> </div> | | | | | | Non-taxable Subtotal 39. Taxable Subtotal 0. Tax 0. Total 39. | |

INTEREST: Coleman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at SEVENTEEN PERCENT (17%) per annum, compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive the right to exercise the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser's will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to merchandise. Credits are to be paid for to full, as presented, and not returned and to make promptly, provided they are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The goods returned must be in the same original condition, and show no evidence of abuse or use for purposes other than the storage of original containers. No cash discount will be allowed on credits. Existing terms, or any additional terms, issued by any governmental authority, on products herein named shall be for account of buyer.

NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WAREHOUSE OR MAILING DEPOT.

COLEMAN

CHEMICAL
NO

INVOICE

REXION

CUSTOMER NO

Remit To: P O Box 2036, East Peoria, IL 61614
(815) 727-3900

BILL TO

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

SHIP TO

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

| DATE | SHIP VIA | FOB | DELIVERED | TERMS |
|-----------------------|------------|---|------------|------------------|
| 06/19/96 | | | | Net 30 Days |
| PURCHASE ORDER NUMBER | ORDER DATE | SALESPERSON | | OUR ORDER NUMBER |
| ME-157897 | 06/19/96 | 19 | | 28614 |
| QUANTITY | UNIT | DESCRIPTION | UNIT PRICE | AMOUNT |
| 1200.00 | 100.00 | NICHLOPROPYLIM 100.00 - III DATE <i>g</i> | | 56.40 |
| | | <i>OKS 822</i> | | |

REXION

REXION BEARING COMPANY

REXION BEARING COMPANY

REXION BEARING COMPANY

REXION BEARING COMPANY

000082

INTEREST: Coleman Chemical Inc. shall charge and Payment system to pay...
WARRANTY: All products are sold without warranty...
NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE...

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPERS NO. 19514

NAME OF CARRIER: CARRIER'S NO.: DATE: 06/11/96

RECEIVED: I warrant to the consignee and carrier in effect on the date of the issue of this Bill of Lading that the property described herein is apparent good order except as noted contents and condition of contents of packages are shown hereon. Consignee and assignee as indicated herein which said carrier, the carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract herein, to be liable to the carrier at said destination for any loss or damage to the property or for any delay in delivery of the property or for any expense incurred by the carrier in connection with the transportation of the property and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth in the Uniform Freight Classification in effect on the date hereof. This is a bill of a non-water shipment. It is the applicable motor carrier classification of tariff. This is a motor carrier shipment. Shipper hereby certifies that he is aware of the terms and conditions of the said bill of lading, including those on the back hereof, set forth in the classification of tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by shipper and accepted for himself and his assigns.

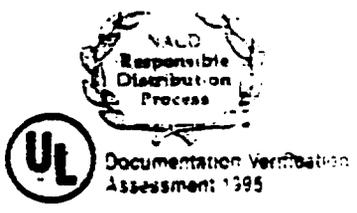
FROM: COLEMAN CHEMICAL INC.
Joliet, Illinois 60435
(815) 727-3900

SHIPPER:

TO: CONSIGNEE Rexnord, Inc.
STREET 2400 Curtiss Street
Downers Grove, IL 60515
DESTINATION

DELIVERING CARRIER: 39 ROUTE: 111 VEHICLE NUMBER:

| NO. PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CODE) | CLASS OR RATE | CHARGES FOR CARRIER USE |
|--------------|----|--|--------------------------|---------------|-------------------------|
| 2 CRS | X | TRICHLOROETHYLENE, 6.1, UN 1710, PG III USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE (PPG) N.D. CUSTOMER PO# ME-157897. HRS. 7AM - 2:30PM. <u>DELIVER ON 6/19/96!!</u> | 1320 LBS | | |
| 2 | | | | 1320 | |



RECEIVED BY: Snow
N Snow

COLEMAN DRIVER:

C.O.D. Amt. \$

C.O.D. FEE:
 PREPAID
 COLLECT \$

* If the agreement between two parties by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's receipt.
Shipper is required to file of items, and a part of Bill of Lading approved by the Interstate Commission.

NOTE—Where the risk is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The amount of declared value of the property is hereby specifically stated by the shipper to be not exceeding \$

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL CHARGES \$
Freight charges are PREPAID unless otherwise noted.
 Check box if charges are Col

BULK HOOP-UP OK'D BY:

PLACARD
SHIPPED TO CARRIER
 YES NO
ACCEPTED BY CARRIER
 YES NO

This is to certify that the above-described materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Interstate Commerce Commission.
FOR EMERGENCY ASSISTANCE SPILLKITS NEARBY CHEMICALS CALL: CHEMTREC 800-424-9300 24 HRS SERVICE

MSDS RECEIVED BY: 000083

HENRI'S Corporation
 2400 Curtis Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 708/969-1770 FAX: 708/969-8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MAY
 BE USED FOR IDENTIFICATION
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

THE ABOVE P.O. NUMBER
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

HENRI'S CORPORATION
 2400 CURTIS STREET
 DOWNERS GROVE, ILL 60515-0722
 CALLER NUMBER 1482
 OWNERS P.O. NO. 1570

ORDER NO. HENRI'S P.O. NO. 1570
 DATE

DATE OF ORDER BUYER TAX EXEMPT ILLINOIS RESALE NO TERMS VALUE

TAXABLE NET WEIGHT GROSS WEIGHT

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY | FROM |
|------|----------|-----|-------------|-------|-------------------------|------|
|------|----------|-----|-------------|-------|-------------------------|------|

P.O. PART 1570
 TRICHO-STYRENE, 55 GAL DRUM,
 55 LBS DRUM
 PRICE PER PAX DATED 1-11-84

 REANCHORS SUMMER SHUTDOWN WILL
 RUN FROM 7-01-86 THRU 7-05-86.
 WE WILL RE-OPEN ON 7-08-86. NO
 SHIPMENTS WILL BE ACCEPTED
 DURING THIS TIME.

0627053

292532 P.O. VALUE \$1056.00
 API EJK API GUE

24 Rene K. ...

WE-1570

H35736

COLEMAN

CHEMICAL
NO.

INVOICE

DATE

Remit To: P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO.

REXNORD

RECEIVED
APR 17 1996

BILL TO

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

REXNORD CORPORATION SHIP TO
REXNORD CORPORATION

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | | | |
|-----------------------|----------|------------|------|-------------|---|------------------|--|----------|--|
| 24 12 96 | | | | DELIVERED | | Net 30 Days | | | |
| PURCHASE ORDER NUMBER | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | | | |
| WE-155475 | | 04/12/96 | | 19 | | 27211 | | | |
| QUANTITY | | ITEM NO. | | DESCRIPTION | | UNIT PRICE | | AMOUNT | |
| REQUIRED | SUPPLIED | U.S. LBS. | | | | | | | |
| 1000.00 | 1000.00 | 0.00 | Lbs. | 82066608 | TRICHLOROETHYLENE 6600 R.D. 2 - NEW DATE | 0.000 | | 1,055.00 | |

REXNORD CORPORATION
642
P
G
065 001



Quality • Responsibility • Reliability

Refusable Federal
Trade Regulation
Act (16 CFR 305.1)

000085

INTEREST: Coleman Chemicals, Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at ANNUAL PERCENT (10%) per annum (simple interest) or the highest interest permitted by law for commercial contracts, whichever is higher, from the date of invoice. Failure to dispute rights under this provision, upon one or more occasions, shall not waive the interest on any subsequent invoice.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own tests, determine suitability of each product for their own use. Seller warrants that all goods covered by this invoice were done in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to merchandise shipped. Goods are to be paid for in full, as invoiced, and full payment will be made promptly. Goods are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The driver's attention must be called to the goods immediately shipped, and make no evidence of damage or loss for outward than the storage of original containers. No cash discount will be allowed on credit. Existing terms, or any conditions, terms, printed by any governmental authority, on products herein normal shall be for account of buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WHOLESALES OR RAILROAD DEPOT.

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

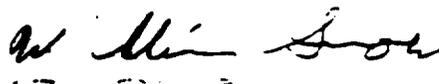
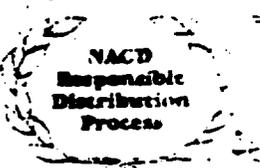
SHIPPER'S NO.

| | | | |
|-----------------|---------------|----------|---------------|
| NAME OF CARRIER | CARRIER'S NO. | DATE | SHIPPER'S NO. |
| | | 04/08/96 | 27000 |

RECEIVED subject to the classifications and terms in effect on the date of the issue of this Bill of Lading. The property described herein is apparent gross weight except as noted. Contents and condition of contents of packages are not guaranteed and designated as indicated below which said carrier, the vessel carrier being understood throughout this contract as meaning any person or corporation in possession of the property under this contract, agrees to its said bill of lading at said destination. It is hereby agreed as to each carrier or as to any of said property over all or any portion of said destination and as to each party at any time involved in all or any of said property that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading and the Uniform Freight Classification in effect on the date hereof. This is a bill of lading for a non-vessel shipment of (1) in the applicable motor carrier classification or (2) if this is a motor carrier shipment, shipper hereby certifies that he is subject to the terms and conditions of the said bill of lading, including those on the back hereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by shipper and accepted by vessel and its agents.

| | |
|--|---|
| FROM: COLEMAN CHEMICAL INC. Joliet, Illinois 60435 (815) 727-3900 | TO: CONSIGNEE Rexnord, Inc. STREET 2400 Curtiss Street Downers Grove, IL 60515 |
| SHIPPER: | DESTINATION |

| | | |
|--------------------|-------|----------------|
| DELIVERING CARRIER | ROUTE | VEHICLE NUMBER |
| 44 | 116 | |

| NO. PACKAGES | HT | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT SUBJECT TO COMM. | CLASS OR RATE | CHARGES FOR CARRIER USE |
|--------------|------|---|-------------------------|---------------|-------------------------|
| 2 | X RQ | TRICHLOROETHYLENE, 6.1, UN 1710, PG III USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 660# N.D. CUSTOMER PO#WE-155475. DELIVER 4/12/96 HRS 7 - 2:30 | 1320 | OS | |
| | |   | | | |
| | | | Page 1 | 1320 | |

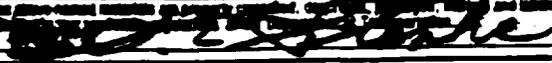
| | | | |
|--------------|--|--|--|
| RECEIVED BY: | COLEMAN DRIVER: <i>Karl W. [Signature]</i> | C.O.D. <input checked="" type="checkbox"/> | S.O.S. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|--------------|--|--|--|

* If the shipment moves between two parts by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. Shipper's weight in case of dispute, not a part of bill of lading approved by the Interstate Commerce Commission.

NOTE—where the rate is dependent on class, shippers are required to state specifically in writing the grade or declared value of the property. The actual or declared value of the property is hereby specifically stated by the shipper to be not exceeding

Weight to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

| | | | |
|-----------------------|---|--|--------------------|
| BULK MAKE-UP OK'D BY: | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above-named contents are properly classified, described, packed, labeled, and loaded and are in proper condition for transportation under this bill of lading. | WEIGHT RECEIVED BY |
| | |  FOR EMERGENCY ASSISTANCE INQUIRY OR SHIPPING CHARGES CALL: CHEMTREC 800-424-9300 DAY OR NIGHT | 000086 |

WHITE - OFFICE GREEN - CONSIGNEE BLUE - SHIPPER YELLOW - OFFICE

The above P.O. number and the following name
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

The above P.O. number and the following name
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

The above P.O. number and the following name
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS,
 PACKAGES AND CORRESPONDENCE

VENDOR: THE NATIONAL...
 THE NATIONAL...

SHIP TO: THE NATIONAL...
 THE NATIONAL...

| STATE OF ORDER | BUYER | TAX EXEMPT | MOIS RESALE NC | TERMS | VALUE |
|----------------|----------|------------|--------------------------|------------|--------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | MARKED IN PLANT BY |
| | | | 0425028 283530 204 | | |
| | | | | P.O. VALUE | \$1056.00 |
| | | | | API | EUR |
| | | | | AP2 | GUB |

Peter Slawey

WE-10547
 H35736

COLEMAN

CHEMICAL
INC.

INVOICE

REXIN

Remit To: P.O. Box 2838, East Peoria, Illinois 61644
309-674-6144

CUSTOMER TO

BILL TO:

Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

SHIP TO:

Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|--|------|----------|------------|--|---------------|---|------------------------|
| 02/14/96 | | | | | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER |
| Verdal | | | 02/14/96 | | JEFF PHILLIPS | | None |
| QUANTITY | | ITEM NO. | | DESCRIPTION | | UNIT PRICE | AMOUNT |
| 1.00 | 1.00 | 0 EA | 303022 | PASTE TRICHLOROETHYLENE PICKED UP ON RAIPEST # J415135. | | 89.0000 | 89.00 |
|  | | | | | | Reasonable subtotal Taxable Subtotal Tax Total | 89. 0. 0. 89. |

220061

P 9

065-973

INTEREST: Coleman Chemical Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at TWENTY PERCENT (20%) per annum, compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive the right to exercise the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser's will, by their own tests, determine suitability of each product for their own use. Seller warrants that all goods covered by this invoice were produced in accordance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to returnable drums. Drums are to be paid for in full, as invoiced, and full refund will be made promptly, provided are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The drums returned must be the same originally shipped, and show no evidence of abuse, or use for purposes other than the storage of original contents. No cash discount will be allowed on drums. Existing terms, or any additional terms, issued by any governmental authority, as products herein covered shall be for account of buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WAREHOUSE OR RAILROAD DEPOT.

Reynold Corporation
 2400 Curgess Street
 Dallas No. 1482
 Downers Grove, IL 60515-0722
 708-969-1770 FAX: 708-969-8827

MUST APPEAR ON ALL INVOICES: PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

DATE OF ORDER BUYER TAX EXEMPT TAXABLE INVOICE NO. SALES TAX NO. TERMS VALUE

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | ISSUED IN PLANT BY | PROMISE |
|------|----------|-----|--|------------|-----------------------|---------|
| | | | 100% POLYURETHANE BEARING WITH POLYURETHANE LINING BEARING MADE ON 1-18-76 | | | |
| | | | | P.O. VALUE | \$59.00 | |

220061

28253

AP1 DES LAP2 SUB
Dorothy J. Matysia

24

COLEMAN

CHEMICAL
INC

INVOICE

Remit To: P.O. Box 203, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO

REVENUE

BILL TO

Reynold, Inc.
1400 Culbiss Street
Downers Grove, IL 60516

SHIP TO:

Reynold, Inc.
1400 Culbiss Street
Downers Grove, IL 60516

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|--|---------|------------|------|-------------|--|---|--------|
| 11-17-95 | | | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | |
| 45-152306 | | 11-17-95 | | 19 | | 25345 | |
| QUANTITY | | UNIT | | ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT |
| REQUIRED | SHIPPED | | | | | | |
| 100.00 | 100.00 | 2.00 | lbs. | 2006600 | POLYCHLOROSTYRENE 60000:835736 2 - 500 DRUM | 0.800 | 80.00 |
| 201050 | | | | | | | |
| P | | | | | | | |
| 065-825 | | | | | | | |
| 000088 | | | | | | | |
|  | | | | | | Net Payable Subtotal Taxable Subtotal Tax (6.500%) Total | |

INTEREST: Coleman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per year, compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive or decrease the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall make bills to commercial clients. Clients are to be sent for to full, as presented, and full returned will be made promptly and are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The goods returned must be the same originally shipped, and show no evidence of abuse, or use for purposes other than the storage of original contents. No cash discount will be allowed on credit. Shipping terms, or any additional terms, listed by governmental authority, as products labels appear shall be for account of buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO-RECEIVER OR FOLLOWING ORDER.

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPER'S NO.

NAME OF CARRIER

CARRIER'S NO.

DATE

01-11-96

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TERMS IN EFFECT ON THE DATE OF THE ISSUANCE OF THIS BILL OF LADING THE PROPERTY DESCRIBED HEREIN IS SHIPPED UNDER ORDER, RECEIVED AS NAMED, CONTAINED AND CONTAINER OR CONTENTS OF PACKAGES... (Standard Bill of Lading terms text)

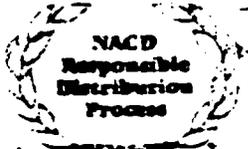
FROM: **COLEMAN CHEMICAL INC.**
 Joliet, Illinois 60435
 (815) 727-3900

TO: **CONSIGNEE** Rexnord, Inc.
STREET 1400 Curtiss Street
 Downers Grove, IL 60515
DESTINATION

SHIPPER:

DELIVERING CARRIER **44** ROUTE **123** VEHICLE NUMBER

| NO. PACKAGES | HTM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO COM.) | CLASS OR RATE | ✓ | CHARGES FOR CARRIER |
|--------------|-----|--|--------------------------|---------------|---|---------------------|
| 2 | DRS | TRICHLOROETHYLENE, -1, UN 1710, PG 111 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 660#ND:H35736 CUSTOMER PO#WE-152316. CUSTOMER CODE H35736 STENCIL CUSTOMER CODE ON DRUMS. <u>DELIVER 1/17/96</u> HRS 7 - 2:30 | 1320 | LS | | |



Page 1

1320

RECEIVED BY: *Sue Martinek* COLEMAN DRIVER: *Paul Oak* C.O.D. AM 5

IF THIS SHIPMENT MOVES BETWEEN TWO COUNTRIES BY A CARRIER BY WATER, THE LAW APPLICABLE TO THE BILL OF LADING SHALL BE THAT APPLICABLE TO THE CARRIER'S OR SHIPPER'S COUNTRY. SHIPPER'S WEIGHT IS THAT OF NET WEIGHT, NOT GROSS WEIGHT, UNLESS OTHERWISE SPECIFIED BY THE SHIPPER.

NOTE—Where the rate is dependent on value, charges are required to state specifically in writing the agreed or declared value of the property. The appropriate declared value of the property is hereby stated and agreed by the shipper to be not exceeding \$

Shipment to Country 7 if conditions of application bill of lading. If this shipment is to be delivered to the consignee, including release of the consignment, the consignee shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

TOTAL CHARGES \$

MILK HOOK-UP ON TO PLACARDS OFFERED TO CARRIER BY SHIPPER: YES NO ACCEPTED BY CARRIER: YES NO

FOR EMERGENCY ASSISTANCE SUPPLYING INFORMATION CALL CHEMTEC 24-HOUR SERVICE 1-800-424-6300

000089

Hennrich Corporation
2400 Curless Street
Carrier No. 1482
Downers Grove, IL 60515-0722
708,969-1770 FAX 708,969-8827

THE ABOVE ZIP NUMBER PLUS THE FOLLOWING MUST
MUST APPEAR ON ALL INVOICES PACKING SLIPS
PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| ITEM | QUANTITY | UOM | DESCRIPTION | PRICE | FOUNDED IN PLANT BY | WOMAN |
|------|----------|-----|-------------|-------|------------------------|-------|
| | | | | | | |

201059

2010530

HP1 BJK HP2 BUE
[Handwritten Signature]

H3573

COLEMAN

CHEMICAL
INC.

INVOICE

Remit To P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO.

REXNORD

RECEIVED
JUN 01 1995
REXNORD CORPORATION
BEARING OPERATION

BILL TO:

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

| 05/26/95 | | DELIVERED | | Net 30 Days | |
|-----------|---------|-----------|------|--|-------|
| WE-143948 | | 05/25/95 | | 18 20865 | |
| 1328.00 | 1328.00 | 0.00 | 1lb. | TRICHLOROETHYLENE 6500 I.P. 2 - Recoditrol 35 Cl. 800 | 1.056 |
| | | | | | 1.056 |
| | | | | | 6.00 |
| | | | | | 1.056 |

REFERENCE NUMBER
P
DATE
05/25/95

COLEMAN Chemical Inc. does not warrant the quality of its products. It is the responsibility of the customer to inspect and test the products received. If the customer is not satisfied with the quality of the products received, it must be reported to the customer's representative immediately. If the customer is not satisfied with the quality of the products received, it must be reported to the customer's representative immediately. If the customer is not satisfied with the quality of the products received, it must be reported to the customer's representative immediately.

NAME OF PARTY

CARRIER NO

DATE

05 10 95

000094

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading. The property described herein is shipped under order except as noted comments and conditions... (Small print text)

FROM: COLEMAN CHEMICAL INC.
John. Inhels 60435
(815) 727-3900

TO: CONSIGNEE Rexnord, Inc.
STREET 2400 Curtiss Street
Downers Grove, IL 60515

SHIPPER:

DESTINATION

DELIVERING CARRIER 43 745 RT ROUTE VEHICLE NUMBER

| NO. PACKAGES | UNIT | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CODE) | CLASS OR RATE | ✓ | CHARGES FOR CARRIER USE |
|--------------|------|--|--------------------------|---------------|---|-------------------------|
| 2 | X 20 | TRICHLOROETHYLENE, 6.1F. UN 1710, PG 111 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 6600 R.D. CUSTOMER NO SWB-143248. DELIVER 5/25/95 | 1320 LBS | | | |

FREIGHT
 COLLECT
 TOTAL CHARGES \$
 RECEIVED BY:

Rexford Corporation
 2400 Curtiss Street
 Caller No: 7482
 Downers Grove, IL 60515-0722
 708.969.7700 FAX: 708.969.8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED N PLANT BY | HOWSE D |
|------|----------|-----|-------------|-------|------------------------|------------|
|------|----------|-----|-------------|-------|------------------------|------------|

606088

282537

F.O. VALUE \$1055.00
 AF1 EOK APR 808

E. M. Blower / J.M.

24

HESTON
 WE-14

COLEMAN

CHEMICAL
INC.

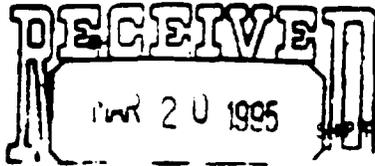
INVOICE

21474

Remit To: P.O. Box 2034, East Troy, IL 61611
(815) 727-8500

CUSTOMER NO

REXIN



BILL TO:

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

REXNORD CORPORATION, Rexnord, Inc.
BEARING OPERATIONS, 2400 Curtiss Street
Downers Grove, IL 60515

| REORDER NO | | REORDER DATE | | REORDER QUANTITY | | REORDER PRICE | |
|------------|----------|--------------|-------|------------------|---|---------------|-------|
| MR-141396 | 03/17/95 | 19 | 19676 | | | | |
| 1320.00 | 1320.00 | 4.00 | Lbs. | 02061000 | TRICHROSPHYLINS (500 L.S.) 2 - PER BAG | 0.500 | 1,056 |

BEARINGS - OF: PART 5
 REAR IN YAMMER PART
 24-
 P
 Q

065-825

1,056
68
1,124

000096

NOTICE: Coleman Chemical Inc. and its agents, suppliers, and carriers are not responsible for any loss or damage to goods in transit, including but not limited to theft, fire, or other causes, unless the carrier is negligent. The carrier's liability is limited to the actual value of the goods at the time of loss. The carrier's liability is not limited to the actual value of the goods at the time of loss. The carrier's liability is not limited to the actual value of the goods at the time of loss.

IMPORTANT: All products are sold as shown. No representation is made by Coleman Chemical Inc. or its agents, suppliers, and carriers as to the quality, quantity, or condition of the goods. The goods are sold as shown, and the buyer is responsible for inspecting the goods upon receipt. The goods are sold as shown, and the buyer is responsible for inspecting the goods upon receipt. The goods are sold as shown, and the buyer is responsible for inspecting the goods upon receipt.

BILL OF LADING

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPER'S NO.

| | | | |
|-----------------|---------------|------|----------|
| NAME OF CARRIER | CARRIER'S NO. | DATE | 03/16 95 |
|-----------------|---------------|------|----------|

RECEIVED Subject to the classifications and tariffs in effect on the date of the issue of this bill of lading, the property described below in apparent good order, except as noted (contents and condition of contents or packages, if known, marked consigned and designated as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to its usual mode of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier or as to any of said carriers that the carrier or carriers shall be liable to the shipper and as to each party if any loss, damage or delay to the property shall be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading and the Uniform Freight Classification in effect on the date hereof, if this is a rate or a rate-schedule shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with the terms and conditions of the said bill of lading, including those on the back thereof, all terms in the classification or tariff which governs the transportation of the shipment, and the said terms and conditions are hereby agreed to by shipper and accepted for himself and his assigns.

FROM: Coleman Chemical Inc.
Joliet, Illinois 60434
(815) 727-3900

SHIPPER:

TO
CONSIGNEE Rexnord, Inc
STREET 2400 Curtiss Street
Downers Grove, IL 60515
DESTINATION

| | | | | | |
|--------------------|----|-------|-----|----------------|--|
| DELIVERING CARRIER | 94 | ROUTE | 118 | VEHICLE NUMBER | |
|--------------------|----|-------|-----|----------------|--|

| NO. PACKAGES | NO. | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CORR.) | CLASS OR RATE | CHARGE FOR CARRIER |
|--------------|------|---|---------------------------|---------------|-------------------------------------|
| 2 | X RC | TRICHLOROETHYLENE, 6.1. UN 1710, PG 111 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 660# M.D. CUSTOMER PHONE-141396. DELIVER 3/17/95 ERS. 7:21:30 COLEMAN | 1320 | | <input checked="" type="checkbox"/> |
| | | QUANTITY REQUESTED RETURNED | | | |
| | | 10 Gal. S.S. (White) @ 300.00 each | | | |
| | | 15 Gal. Poly @ 25.00 each | | | |
| | | 55 Gal. S.S. (White) @ 550.00 each | | | |
| | | 55 Gal. Poly @ 45.00 each | | | |
| | | 55 Gal. Steel Drum @ 25.00 each | | | |
| | | 55 Gal. Non-Deposit Drum | | | |
| | | | | 1320 | |

RECEIVED BY: *[Signature]*

COLEMAN DRIVER: _____

C.O.D. *[Signature]*

C.O.D. FEE:
 FREIGHT
 COLLECT \$

* If the consignment moves between two parts by a carrier by water, the bill of lading shall state whether it is driver's or shipper's weight. Shipper's weight is that of gross net a part of bill of lading approved by the Interstate Commerce Commission.

NOTE—Where the bill is consigned or value, carriers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be the net-amounting.

Receipt collection of all conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without payment on the consignment, the consignor shall be liable for the collection. The carrier shall not make delivery of this shipment without payment of freight and of other bills of lading.

TOTAL CHARGES \$

EXLX MARK-UP OF'S

PLACARDS
 YES NO
 YES NO

This is to certify that the above values declared are properly checked, counted, weighed, measured and otherwise verified by the driver of the carrier.

Freight charges are PREPAID unless
 Check box if charges are
UNLESS RECEIVED
000097

2400 BUSINESS STREET
 Caller No. 1482
 Downers Grove, IL 60515-0722
 708.969-1770 FAX: 708.969-8827

MUST APPEAR ON ALL INVOICES PAGE NO. 2, 3, 4, 5
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

CHEMICAL
 STREET

SHIP TO
 ADDRESS
 CITY
 STATE
 ZIP

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO. | TERMS | VALUE |
|---------------|----------|------------|--|------------|----------------------|
| | | TAXABLE | A | | |
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | REQUIRED IN PLANT BY |
| | | | RE: PART FOR LABORATORY USE VALUE PER LETTER DATED ***** THIS IS A FISH ORDER ***** | | |
| | | | | P.O. VALUE | \$1056.00 |

322070

282530

24

Don'tley J. Motz

WE-111
 H25736

COLEMAN

CHEMICAL
INC.

INVOICE

4536

Remit To P.O. Box 2838, East Peoria, Illinois 61641
309-674-1111

CUSTOMER NO

REXIN

DATE:

SHIP TO:

Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

Rexnord Corporation
2320 Curtiss street
Downers Grove, IL 60515

| | | | |
|---|--|--------------------------------|--|
| <p>*** PLEASE SEND PAYMENT TO: REXNORD CORP., EAST PEORIA, ILLINOIS 61641</p> | | | |
| <p>BOARDING AGENT</p> | | <p>75000</p> | |
| <p>PE: [illegible]</p> | | <p>[Handwritten signature]</p> | |
| <p>[Handwritten initials]</p> | | <p>RECEIVED</p> | |
| <p>[Handwritten: 473]</p> | | <p>REXNORD CORPORATION</p> | |
| <p>[Handwritten: 473]</p> | | <p>[Handwritten: 473]</p> | |

BILL TO:

Rexnord Corporation
 2400 Curtiss street
 Downers Grove, IL 60515

SHIP TO:

Rexnord Corporation
 2324 Curtiss street
 Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|---|------|------------|----------|---------------|--|--|--------|
| 06/20/95 | | ONE Truck | | Peoria | | Net 30 Days | |
| ORDER NUMBER | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER | |
| Verbal / | | 06/20/95 | | 14 | | 23100 | |
| QTY | UNIT | PRICE | ITEM NO. | DESCRIPTION | | UNIT PRICE | AMOUNT |
| 1.00 | 1.00 | 0.00 ea. | WASTE | Waste Pick-Up | | 89.000 | 89. |
| WASTE PICKED UP ON 6/15/95 TAKEN TO WASTE RESEARCH FOR DISPOSAL MANIFEST # WI J415133 *** PLEASE SEND PAYMENT TO: P.O. BOX 2838, EAST PEORIA, ILLINOIS 61611 | | | | | | | |
|  | | | | | | Non-taxable Subtotal 89. Taxable Subtotal 0. Tax 0. Total 89. | |

RECEIVED
 JUN 26 1995
 REXNORD CORPORATION
 BEARING OPERATION

INTEREST: Cashman Chemicals Inc. shall charge, and Purchaser agrees to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per annum, compounded monthly or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive the right to exercise the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchasers will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to resins/epoxy drums. Drums are to be used for full, as intended, and full return will be made promptly. Drums are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The drums returned must be the same originally shipped, and show no evidence of abuse or use for purposes other than the storage of original contents. No cash discount will be allowed on drums. Existing taxes, or any additional taxes, levied by any governmental authority, on products herein named shall be the account of Buyer. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WAREHOUSE OR RAILROAD DEPOT.

Rexnord Corporation
 2400 Curiss Street
 Caller No. 482
 Downers Grove, IL 60515-0722
 708/969-4370 FAX: 708/969-8827

No. _____
 THE ABOVE P.O. NUMBER PLUS THE FOLLOWING
 MUST APPEAR ON ALL INVOICES PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

| DATE OF ORDER | BUYER | TAX EXEMPT | UNCLAS RESALE NO | TERMS | VALUE |
|---------------|----------|------------|---|---------|--------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | POURED IN PLANT BY |
| | | | 15' LINE WITH LINE PARTS KIT. PARTS FOR REPAIRING WHITE DISPSAL. PICK UP MADE ON 4-15-95 REF INVOICE NO. 4516 | | |
| | | | 708073 | | <i>Artural</i> |
| | | | P.O. VALUE | \$89.00 | |

AP1 TT AP2 GGB

Barothy J Matija

WE-14555

000101

COLEMAN

CHEMICAL
NO.

INVOICE

Remit to P.O. Box 2036 East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO.

REVISION

RECEIVED
JUL 20 1995

BILL TO

Reynold, Inc.
2400 Burgess Street
Downers Grove, IL 60515

SHIP TO:
REYNOLD CORPORATION
BEARING OPERATION

Reynold, Inc.
2400 Burgess Street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|---|---------|------------|---------|-------------|--|--------------|----------|
| 10/17/95 | | | | DELIVERED | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | ORDER DATE | | SALESPERSON | | ORDER NUMBER | |
| WB-149212 | | 10/17/95 | | 19 | | 23670 | |
| QUANTITY | UNIT | PRICE | AMOUNT | ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT |
| 1320.00 | 1320.00 | 0.00 | 1320.00 | 82126408 | TRICHLOROETHYLENE IS 6041 IS - NEW DRUM | 0.00 | 1,056.00 |
| <div data-bbox="933 1039 1583 1302" data-label="Text"> <p>BEARING OPERATIONS 10/17/95 P 9</p> </div> | | | | | | | |
| <div data-bbox="1128 1333 1396 1438" data-label="Text"> <p>065-82</p> </div> | | | | | | | |
| <div data-bbox="860 1596 1104 1806" data-label="Image"> </div> | | | | | | | |
| <div data-bbox="1266 1617 1615 1743" data-label="Text"> <p>Payable Federal 1,056.00 88.50 1,124.50</p> </div> | | | | | | | |
| <div data-bbox="1421 1785 1502 1816" data-label="Text"> <p>000102</p> </div> | | | | | | | |

INTEREST: Coleman Chemical Inc. shall charge, and Purchaser agrees to pay, interest on any part of balances not paid within thirty days of invoice. Interest shall be charged at ANNUAL PERCENT (10%) per annum, compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date payment is due. Failure to make payment within this period, upon oral or written demand, shall not waive the right to enforce the same retroactively.

IMPORTANT: All products are sold without warranty of any kind and purchasers will, by their use hereof, deem themselves to be accepting responsibility for their use. Seller warrants that all goods covered by this Bill of Sale conform to the requirements of the Fair Label Standards Act of 1988, as amended. Seller shall not be liable for any claims, damages, or losses arising from the use of the goods covered by this Bill of Sale, provided that the goods are returned to original point of shipment within one year from date of invoice. Seller's freight charges to the purchaser shall be the responsibility of the purchaser, and no claims or damages shall be made against Seller for the storage of original contents. No cash discount will be allowed on drums, including liquid, or any condition thereon, unless by the purchaser's written request. All payments, including cash, shall be for accounts only. NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO THE PURCHASER'S RECEIPT.

NAME OF CARRIER

CARRIER'S NO.

DATE

SA 000000

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TERMS IN EFFECT AT THE TIME OF THE ISSUING OF THIS BILL OF LADING THE PROPERTY DESCRIBED HEREIN IS ADDED TO THE ORDER SUBJECT AS NOTED HEREON AND CONSIGNEE AND CONSIGNOR OF PACKAGES HEREON SHOWN MARKED UNDESIGNED AND DESIGNATED AS INDICATED HEREON WHICH SAID CARRIER THE SAID CARRIER BEING UNDERSTOOD THROUGHOUT THE CONTRACT AS MEANING ANY PERSON OR CORPORATION IN POSSESSION OF THE PROPERTY DESCRIBED IN THE CONTRACT SUBJECT TO THE SAID SUBJECT OF DELIVERY AT SAID DESTINATION OR AS ORDERED TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION. IT IS HEREBY AGREED BY EACH CARRIER OF SAID PROPERTY OVER ALL OR ANY PORTION OF SAID DESTINATION AND AS TO EACH PARTY AT ANY TIME INTERESTED IN ALL OR ANY OF SAID PROPERTY THAT EVERY SERVICE TO BE PERFORMED HEREUNDER SHALL BE SUBJECT TO THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC STRAIGHT BILL OF LADING SET FORTH IN FORM C-1000, FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREON. THIS IS A BILL OF LADING FOR A "TRUCK" SHIPMENT. (1) IN THE APPLICABLE MOTOR CARRIER CLASSIFICATION OF THIS BILL OF LADING THE SAID CARRIER SHALL BE SUBJECT TO THE TERMS AND CONDITIONS OF THE SAID BILL OF LADING INCLUDING THOSE ON THE BACK THEREOF SET FORTH IN THE CLASSIFICATION OF THIS SHIPMENT AND THE SAID TERMS AND CONDITIONS ARE HEREBY ACCEPTED AND ACCORDED TO BY THE SAID CARRIER AND HIS ASSIGNEES.

FROM: COLEMAN CHEMICAL INC.
Joliet, Illinois 60435
(815) 727-3900

TO: CONSIGNEE Rexnord, Inc.
STREET 2400 Curtiss Street
Downers Grove, IL 60515
DESTINATION

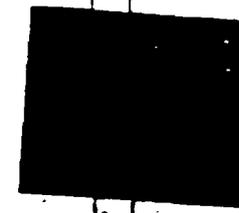
SHIPPER:

DELIVERING CARRIER 116 ROUTE VEHICLE NUMBER

| NO. PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CORR.) | CLASS OR RATE | ✓ | CHARGE FOR CARRIER |
|--------------|------|--|---------------------------|---------------|---|--------------------|
| 2 DRS | X 20 | TRICHLOROETHYLENE, 6.1, UN 1710, PG 111 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE (HD) 6600 MD CUSTOMER PG#WB-149212. DELIVER 10/17/95 HR# 7-2100 | 1320 LBS | | | |
| 2 | | | 1320 | | | |



Page 1



RECEIVED BY: *Walter*

ORIGINATOR: *E.O.B.*

R.R. PAY: FREIGHT COLLECT \$

• If the package shown herein was sent by a carrier to a consignee, the carrier is not responsible for the loss or damage to the contents of the package, including the weight and contents, unless the carrier is shown to be negligent.

• This bill of lading is subject to the terms and conditions of the applicable motor carrier classification of this shipment.

• Subject to Section 7 of conditions of shipment set forth in the reverse of this document, the carrier is not responsible for the loss or damage to the contents of the package, including the weight and contents, unless the carrier is shown to be negligent.

TRAILER CHARGES \$
Please check on PREPUB status
 Check for 2 charges on THIS RECEIVED

AREA OF EFFECT

PLACEMENT: YES NO

FOR CARRIER'S USE ONLY: **EMERGENCY 800-421-3900**

FERRIS CORPORATION
 2400 Curmiss Street
 Caller No 1482
 Downers Grove IL 60515-0722
 708.969.7770 FAX: 708.969.8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MUST
 MUST APPEAR ON ALL VOICES PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENUE

SHIP TO

STATE ORDER NUMBER TAX EXEMPT TAXES RESALE NO. TERMS VALUE
 ITEM QUANTITY PUM DESCRIPTION PRICE NUMBER IN PLANT BY

| | | | |
|--|--|---------------------|---------------------------|
| | | 660-220T 1027099 | F.O.B. VALUE \$1.95.00 |
|--|--|---------------------|---------------------------|

2525530
 Kenneth O'Keefe

44
 5

432736

COLEMAN

CHEMICAL
INC.

INVOICE

Remit To: P.O. Box 2036, East Peoria, IL 61611
815-727-3900

CUSTOMER NO.

DATE

BILL TO

Reynold Corp
1400 Durbine Street
Downers Grove, IL 60515

SHIP TO

Reynold Corp
1400 Durbine Street
Downers Grove, IL 60515

| 07/24/95 | | DELIVERED | | Net 30 Days | | | |
|-----------|---------|-----------|------|--|--|---|----------|
| WE-145985 | | 07/24/95 | | 19 | | | |
| 1320.00 | 1320.00 | 9.00 | lbs. | 82066609 | TRICHLOROETHYLENE 6608 R.D - Reconditioned 55 Gal. Drum | 9.00 | 1,359.00 |
| | | | | <p>RECEIVED</p> <p>JUL 27 1995</p> <p>REXNORD CORPORATION BEARING OPERATION</p> | | | |
| | | | | <p>065-825</p> | | | |
| | | | |  | | <p>Defensible Subtotal</p> <p>Payable Subtotal</p> <p>Tax (6.500%)</p> <p>Total</p> | |
| | | | | | | 000105 | |

WARNING: Coleman Chemical Inc. and its agents and distributors agree to pay, immediately any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per annum, on the unpaid balance, or the highest interest permitted by law, whichever is higher, from the date of invoice. Failure to comply with this provision, upon one or more occasions, shall not waive the right to suspend the price concession.

DISCLAIMER: All products are sold without warranty of merchantability and product liability. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Federal Insecticide, Fungicide and Rodenticide Act (FIFRA) and are registered with the Environmental Protection Agency (EPA). No other claims are made for these products. The goods are sold as shipped, and there is no warranty of fitness for any purpose other than that stated on the label. No other claims are made for these products. The goods are sold as shipped, and there is no warranty of fitness for any purpose other than that stated on the label. No other claims are made for these products. The goods are sold as shipped, and there is no warranty of fitness for any purpose other than that stated on the label. No other claims are made for these products.

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPERS 40

| | | |
|-----------------|---------------|----------|
| NAME OF CARRIER | CARRIER'S NO. | DATE |
| | | 07/27/95 |

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TERMS OF THE BILL OF LADING THE PROPERTY DESCRIBED BELOW IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE CONTRACT AS HEREIN SET FORTH. THE CARRIER'S LIABILITY IS LIMITED TO THE NET WEIGHT OR GROSS WEIGHT OF THE PROPERTY AS SHIPPED. THE CARRIER SHALL NOT BE RESPONSIBLE FOR LOSS OF OR DAMAGE TO THE PROPERTY OR FOR DELAY IN DELIVERY OF THE PROPERTY UNDER THE CONTRACT AGREEMENT. THE CARRIER SHALL NOT BE RESPONSIBLE FOR LOSS OF OR DAMAGE TO THE PROPERTY OR FOR DELAY IN DELIVERY OF THE PROPERTY UNDER THE CONTRACT AGREEMENT. THE CARRIER SHALL NOT BE RESPONSIBLE FOR LOSS OF OR DAMAGE TO THE PROPERTY OR FOR DELAY IN DELIVERY OF THE PROPERTY UNDER THE CONTRACT AGREEMENT.

| | |
|--|--|
| FROM: COLEMAN CHEMICAL INC. Joliet, Illinois 60435 (815) 727-3900 | TO: CONSIGNEE Rexnord, Inc. STREET 2400 Curciss Street Downers Grove, IL 60515 |
| SHIPPER | DESTINATION |

| | | |
|--------------------|-------|----------------|
| DELIVERING CARRIER | ROUTE | VEHICLE NUMBER |
| 44 | 121 | |

| NO. PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO COMB.) | CLASS OR RATE | CHARGE FOR CARRIER |
|-----------------|------|--|---------------------------|---------------|--------------------|
| 2 <i>ORS</i> | X RC | TRICHLOROETHYLENE, 6.1, UN 1710, PG 111 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 660# <i>RD</i> CUSTOMER PO#WE-145985. DELIVER <u>7/24/95</u> HRS 7 - 2:30 | 1320 <i>LD</i> | | |



Page 1

1320

| | | | |
|---------------------------------|------------------------------------|---------------------------|--|
| RECEIVED BY: <i>[Signature]</i> | COLEMAN DRIVER: <i>[Signature]</i> | C.O.D. <i>[Signature]</i> | C.O.D. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|---------------------------------|------------------------------------|---------------------------|--|

| | | |
|--|--|--|
| <p>When the use is dependent on other persons and required to state specifically in writing the name of person or persons to whom the property is being consigned by the shipper to be received.</p> | <p>Subject to Section 7 of conditions of contracts all of which, if not attached to it or referred to in the contract, without recourse to the consignor, the consignee shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other charges.</p> | <p>TOTAL CHARGES \$</p> <p>Freight charges are PREPAID unless otherwise indicated.</p> <p><input type="checkbox"/> Check box if charges are C.O.D.</p> |
|--|--|--|

| | | |
|---|---|---------------------------------------|
| <p>PLACED IN CHARGE</p> <p><input type="checkbox"/> BY</p> <p><input type="checkbox"/> BY</p> | <p>COLEMAN CHEMICAL INC. 815-727-3900</p> | <p>MSDS RECEIVED BY</p> <p>000106</p> |
|---|---|---------------------------------------|

Rexnord Corporation
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 708/969-1770 FAX: 708/969-8827

NO. THE ABOVE P.O. NUMBER PLUS THE FOLLOWING MARK

MUST APPEAR ON ALL INVOICES, PACKING SLIPS, PACKAGES AND CORRESPONDENCE

VENDOR

SHIP TO

STATE OF ORDER BUYER TAX EXEMPT ILLINOIS RESALE NO. TERMS VALUE

ITEM QUANTITY PUM DESCRIPTION PRICE PROMISE

RECEIVED
 DEPT. OF REVENUE
 DEPT. OF REVENUE

810663

TOTAL VALUE \$1156.00

APR 25 1982

Handwritten signature

WEIGHT

H3:750

708/969-1770

2-

COLEMAN

CHEMICAL
NC.

INVOICE

Remit To: P.O. Box 2036, East Peoria, IL 61611
(815) 727-3900

CUSTOMER NO.

FORM 1

BILL TO

Remit To: P.O. Box 2036
2400 Curbiess Street
Downers Grove, IL 60515

SHIP TO

Reynold, Inc.
2400 Curbiess Street
Downers Grove, IL 60515

| NOV 11 1994 | | DECEMBER | | Net 30 Days | | | |
|---|---------|----------|------|-------------|--|--------|-------|
| 4B-196888 | | 11/11/94 | | 19 17307 | | | |
| 1000.00 | 1000.00 | 0.00 | 150. | 92066698 | TRICHLOROETHYLENE 6600 R.D 2 - Reconditioned 55 Gal. Drum | 0.900 | 1.850 |
| <p>P</p> <p>065-828</p> <p>TO BE PAID</p> <p>NOV 10</p> <p>REYNOLD COR.</p> <p>BEARING OPE</p> <p>MADE RESPONSIBLE BY REYNOLD COR.</p> <p>Accountable Subtotal</p> <p>Variable Subtotal</p> <p>(6.5000)</p> | | | | | | | |
| | | | | | | 000108 | |

INTEREST: Coleman Chemical Inc. and charge, and Purchaser agree to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at TWENTY PERCENT (20%) per annum, prorated monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Penalties pertaining to late payment, upon one or more accounts, shall not waive the interest on any account.

IMPORTANT: All products are sold without warranty of any kind and purchaser will, by their own test, determine suitability and application for their use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to merchandise until payment in full is received, and full release will be made promptly, provided compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Return freight charges to be prepaid. The purchaser shall be responsible for return freight charges and shall be responsible for any loss or damage to the goods in transit. The purchaser shall be responsible for any loss or damage to the goods in transit. The purchaser shall be responsible for any loss or damage to the goods in transit. The purchaser shall be responsible for any loss or damage to the goods in transit.

NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO DESTINATION.

RECEIVED subject to the classification and terms in effect on the date of issue of this bill of lading. The property described herein is hereby sold under the terms, conditions and conditions of carriage of the carrier and designated as indicated below. Such carrier, the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property subject to the usual trade of delivery at said destination. It is the duty of the carrier to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier at all or any of said property over at all or any of said destination and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to the terms and conditions of the Uniform Domestic Freight Bill of Lading or Uniform Freight Classification in effect on the date hereof. If this is a bill of a rail-water shipment or if in the applicable motor carrier classification or tariff it is a motor carrier shipment. Shipper hereby certifies that the terms and conditions of the said bill of lading, including those on the back hereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby accepted and approved for himself and his assigns.

FROM: Coleman Chemical Inc.
 Joliet, Illinois 60434
 (815) 727-3900

TO: CONSIGNEE *Rockwell Int'l*
STREET *14000 Sycamore Street*
Downers Grove, IL 60515
DESTINATION

SHIPPER:

DELIVERING CARRIER *118* ROUTE VEHICLE NUMBER

| NO. PACKAGES | HT | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO COM.) | CLASS OR RATE | ✓ | (FOR CARRIER) | | | | | | | | | | | | | | | | | | |
|--------------|----------|---|--------------------------|---------------|-------------------------------------|---------------|--|---------------------------|--|--|-------------------------------------|--|--|---------------------------|--|--|---------------------------------|--|--|--------------------------|--|--|--|--|
| | | <p>TRICHLOROETHYLENE IN 1" X 10" PG 111 USE EMERGENCY RESPONSE GUIDE 4 TRICHLOROETHYLENE</p> <p>CUSTOMER PHONE-136674 DELIVER HRS 7-2:30</p> <p>COLEMAN</p> | 1320 | <i>CB5</i> | | | | | | | | | | | | | | | | | | | | |
| | | <p>QUANTITY</p> <table border="1"> <tr> <td>REQUESTED</td> <td>RETURNED</td> <td>18 Gal. S.S. (Metric) @ 350.00 each</td> </tr> <tr> <td></td> <td></td> <td>16 Gal. Poly @ 25.00 each</td> </tr> <tr> <td></td> <td></td> <td>85 Gal. S.S. (Metric) @ 550.00 each</td> </tr> <tr> <td></td> <td></td> <td>85 Gal. Poly @ 45.00 each</td> </tr> <tr> <td></td> <td></td> <td>85 Gal. Steel Drum @ 25.00 each</td> </tr> <tr> <td></td> <td></td> <td>85 Gal. Non-Deposit Drum</td> </tr> </table> | REQUESTED | RETURNED | 18 Gal. S.S. (Metric) @ 350.00 each | | | 16 Gal. Poly @ 25.00 each | | | 85 Gal. S.S. (Metric) @ 550.00 each | | | 85 Gal. Poly @ 45.00 each | | | 85 Gal. Steel Drum @ 25.00 each | | | 85 Gal. Non-Deposit Drum | | | | |
| REQUESTED | RETURNED | 18 Gal. S.S. (Metric) @ 350.00 each | | | | | | | | | | | | | | | | | | | | | | |
| | | 16 Gal. Poly @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | |
| | | 85 Gal. S.S. (Metric) @ 550.00 each | | | | | | | | | | | | | | | | | | | | | | |
| | | 85 Gal. Poly @ 45.00 each | | | | | | | | | | | | | | | | | | | | | | |
| | | 85 Gal. Steel Drum @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | |
| | | 85 Gal. Non-Deposit Drum | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 1320 | | | | | | | | | | | | | | | | | | | | |

RECEIVED BY: *an Snow*

COLEMAN INTER: *11-11-94*

C.O.D. *Ans 8*

C.O.D. FEE:
 PREPAID
 COLLECT \$

* If the shipment moves between two bills by a carrier by order, the bill reports that the bill of lading shall state whether it is carrier's or shipper's weight. Shipper's weight in case of cargo; net a part of 88 of Lading approved by the Interstate Commission.

NOTE—Where the net is expressed in value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL CHARGES \$

Freight charges are PREPAID and

Check box if charges

BULK PICK-UP OK'D BY:

PLACARDS OFFERED TO CARRIER
 YES NO
 ACCEPTED BY CARRIER NO
 YES NO

This is to certify that the above named resources are properly classified, described, labeled, packaged, marked and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

FOR EMERGENCY ASSISTANCE INVOLVE HAZARDOUS CHEMICALS CALL: CHEMTREC 800-424-9300 DAY OR NIGHT

MOVS RECEIVED

COLEMAN

CHEMICAL
INC

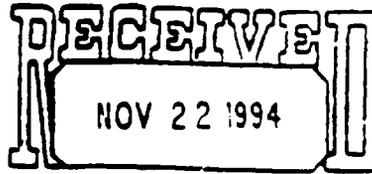
INVOICE

1461
REXNORD

75 Sanger Street, P.O. Box 5098 Peoria, Illinois 61601

(309) 674-6144

CUSTOMER NO



BILL TO:

Rexnord Corporation
2400 Curtiss street
Downers Grove, IL 60515

REXNORD INC.
BEARING OPERATION

SHIP TO:

Rexnord Corporation
2324 Curtiss street
Downers Grove, IL 60515

| DATE | | SHIP VIA | | F.O.B. | | TERMS | |
|--|----------|------------|------------|---------------|-------------|----------------------|------------------|
| 11/17/94 | | Our Truck | | Peoria | | Net 30 Days | |
| PURCHASE ORDER NUMBER | | | ORDER DATE | | SALESPERSON | | OUR ORDER NUMBER |
| Verbal | | | 11/17/94 | | 14 | | 20573 |
| QUANTITY | QUANTITY | UNIT PRICE | ITEM NO. | DESCRIPTION | UNIT PRICE | AMOUNT | |
| 2.00 | 2.00 | 89.00 | WASTE | Waste Pick-Up | 89.00 | 178.00 | |
| <p>WASTE PICKED UP ON 10/7/94 TAKEN TO WASTE RESEARCH FOR DISPOSAL MANIFEST # WI J505022</p> | | | | | | | |
| | | | | | | | |
| | | | | | | 000111 | |
| | | | | | | Reparable Subtotal | 178.00 |
| | | | | | | Irreparable Subtotal | 0.00 |
| | | | | | | Tax | 0.00 |
| | | | | | | Total | 178.00 |

INTEREST: Coleman Chemical, Inc. shall charge and Purchaser agrees to pay, interest on any and all unpaid invoices within thirty (30) days of invoice. Interest shall be charged at NINETEEN PERCENT (19%) per annum, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of invoice. Failure to exercise rights under this provision, upon one or more occasions, shall not waive the right to exercise the same subsequently.

IMPORTANT: All products are sold without warranty of any kind and purchaser's will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title in returned crates. Goods are to be paid for in full, as invoiced, and full payment will be made promptly. Returned crates are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The crates returned must be the same originally shipped, and show no evidence of abuse, or use for purposes other than the storage of original contents. No cash discount will be allowed on crates, loading fees, or any additional fees, owed by any governmental authority, on products herein named that be for account of buyer.

NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO WAREHOUSE OR BUYER'S DEPOT.

FORM 1000

LEMAN

CHEMICAL
NO.

INVOICE

CUSTOMER NO.

Remit To: P.O. Box 2036, East Peoria, IL 61611
815) 727-2000

BILL TO

Rexford, Inc
2400 Curtiss Street
Downers Grove, IL 60515

SHIP TO

Rexford, Inc
2400 Curtiss Street
Downers Grove, IL 60515

| Q9730794 | | DELIVERED | | Net 30 Days | | | |
|-----------|---------|-----------|------|-------------|--|---------------|-------|
| WB-135345 | | 09/30/94 | | 16475 | | | |
| 1320.00 | 1320.00 | 0.00 | lbs. | 8206631 | TRICHLOROETHYLENE 6000 L.B 2 - Reconditioned 55 Gal. Drum | 0.300 | 1.256 |
| | | | | | | <p>000115</p> | |



Nonferrous Subst
Ferrous Subst
P&H 6,500-3
P&H

INTEREST Lemman Chemicals Inc. shall charge, and Purchaser agree to pay, interest on any and all balances not paid within thirty (30) days of invoice. Interest shall be charged at rate (not less than 10% per year) compounded monthly, or the highest interest permitted by law for commercial accounts, whichever is higher, from the date of breach. Purchaser retains title under this purchase, upon one or more occasions, until we receive the cash substantially.

IMPORTANT: All products are sold without warranty of any kind and purchasers will, by their own tests, determine suitability of such products for their own use. Seller warrants that all goods covered by this invoice are in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended. Seller shall retain title to reconditioned drums. Drums are to be paid for in full, as invoiced, and full refund will be made promptly if are returned to original point of shipment within one year from date of invoice. Return freight charges to be prepaid. The drums returned must be the same originally shipped, and show no evidence of abuse, or use for other than the storage of original contents. No cash discount will be allowed on drums, including taxes, or any additional taxes, levied by any governmental authority, on products herein named shall be for account of buyer.

NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE ALLOWED AFTER DELIVERY IS MADE IN GOOD CONDITION TO RECIPIENT OF GOODS.

FORM 1000 COPY - BLUE

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPER'S NO

| | | | |
|-----------------|--------------|------|--------------|
| NAME OF CARRIER | CARRIER'S NO | DATE | SHIPPER'S NO |
|-----------------|--------------|------|--------------|

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TERMS OF SERVICE ON THE DATE OF THE ISSUANCE OF THIS BILL OF LADING THE PROPERTY DESCRIBED BELOW IN APPARENT GOOD ORDER SUBJECT AS NOTED, CORRECTED AND CONDITION OF CONTENTS OF PACKAGES, UNLESS OTHERWISE NOTED, AND DESIGNATED AS FREIGHT BASIS WHICH SAID CARRIER (THE SAID CARRIER BEING UNDERSTOOD THROUGHOUT THIS CONTRACT AS INCLUDING ANY PERSON OR CORPORATION IN POSSESSION OF THE PROPERTY UNDER THE CONTRACT AGREES TO DELIVER TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, OR TO SUCH OTHER PLACE AS IS ORDERED, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION. IT IS MUTUALLY AGREED AS TO EACH CARRIER OF ALL OR ANY OF SAID PROPERTY THAT SAID CARRIER SHALL BE SUBJECT TO THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREON, OR AS TO ALL OR ANY OF SAID PROPERTY THAT EVERY SERVICE TO BE PERFORMED HEREUNDER SHALL BE SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREON. IF THIS IS A BILL OF A RATE-MAKER SHIPMENT OR IS IN THE APPLICABLE MOTOR CARRIER CLASSIFICATION OR TERM, IT IS A MOTOR CARRIER SHIPMENT. SHIPPER HEREBY CERTIFIES THAT HE IS AWARE OF THE TERMS AND CONDITIONS OF THE SAID BILL OF LADING, INCLUDING THOSE ON THE BACK HEREON, SET FORTH IN THE CLASSIFICATION OF TERM WHICH GOVERNS THE TRANSPORTATION OF THIS SHIPMENT, AND THE SAID TERMS AND CONDITIONS ARE HEREBY AGREED TO BY SHIPPER AND ACCEPTED BY CARRIER AND HIS AGENTS.

| | |
|---|---|
| FROM: Coleman Chemical Inc. Joliet, Illinois 60434 (815) 727-3900 SHIPPER: | TO: Maxford, Inc. CONSIGNEE: 2400 Duffless Street Downers Grove, IL 60130 STREET: DESTINATION: |
|---|---|

| | | |
|--------------------|-------|----------------|
| DELIVERING CARRIER | ROUTE | VEHICLE NUMBER |
|--------------------|-------|----------------|

| NO. PACKAGES | NO. | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CORR.) | CLASS OR RATE | ✓ | CHARGES FOR CARRIER USE | | | | | | | | | | | | | | | | |
|-------------------------------------|----------|--|---------------------------|---------------|-----------|-------------------------|-------------------------------------|--|---------------------------|--|-------------------------------------|--|---------------------------|--|---------------------------------|--|-------------------------|--|-------------|--|--|--|
| | | TRICHLOROETHYLENE 30 L. UN 1710, PG 100 USE EMERGENCY RESPONSE GUIDE 74 TRICHLOROETHYLENE 660# RED CUSTOMER PG#NE-135345 DELIVER 9/30/94 HRS 7 - 2:30 <h1 style="text-align: center;">COLEMAN</h1> <div style="text-align: center;">  </div> <table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">QUANTITY</th> </tr> <tr> <th>REQUESTED</th> <th>RETURNED</th> </tr> </thead> <tbody> <tr> <td>18 Gal. S.S. (Metric) @ 300.00 each</td> <td></td> </tr> <tr> <td>18 Gal. Poly @ 25.00 each</td> <td></td> </tr> <tr> <td>35 Gal. S.S. (Metric) @ 500.00 each</td> <td></td> </tr> <tr> <td>35 Gal. Poly @ 45.00 each</td> <td></td> </tr> <tr> <td>35 Gal. Steel Drum @ 25.00 each</td> <td></td> </tr> <tr> <td>35 Gal. Non-Droped Drum</td> <td></td> </tr> </tbody> </table> <div style="text-align: right;"> Page 1 </div> | QUANTITY | | REQUESTED | RETURNED | 18 Gal. S.S. (Metric) @ 300.00 each | | 18 Gal. Poly @ 25.00 each | | 35 Gal. S.S. (Metric) @ 500.00 each | | 35 Gal. Poly @ 45.00 each | | 35 Gal. Steel Drum @ 25.00 each | | 35 Gal. Non-Droped Drum | | 1320 CGS | | | |
| QUANTITY | | | | | | | | | | | | | | | | | | | | | | |
| REQUESTED | RETURNED | | | | | | | | | | | | | | | | | | | | | |
| 18 Gal. S.S. (Metric) @ 300.00 each | | | | | | | | | | | | | | | | | | | | | | |
| 18 Gal. Poly @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | |
| 35 Gal. S.S. (Metric) @ 500.00 each | | | | | | | | | | | | | | | | | | | | | | |
| 35 Gal. Poly @ 45.00 each | | | | | | | | | | | | | | | | | | | | | | |
| 35 Gal. Steel Drum @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | |
| 35 Gal. Non-Droped Drum | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|--------------------------------|----------------------------------|-----------------------|--|
| RECEIVED BY: K. M... | COLEMAN DRIVER: Tom... | C.O.D.: Aug. 9 | C.O.B. FEE: <input type="checkbox"/> PREPARE <input type="checkbox"/> COLLECT |
|--------------------------------|----------------------------------|-----------------------|--|

* If the agreement between two bills by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's receipt.
 Shipper's receipt in lieu of mate: not a part of bill of lading approved by the Interstate Commerce Commission.

NOTE—where this bill is presented on value, shippers are required to state immediately in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$

Subject to Section 7 of conditions of applicable bill of lading, if this document is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this document without payment of freight and all other lawful charges.

(Signature of Consignor)

| | | | |
|------------------------|--|---|--|
| BLANK HOOK-UP OK'S BY: | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> ACCEPTED BY CARRIER <input type="checkbox"/> NO | This is to certify that the above named resources are properly classified, described, packaged, marked and labeled and comply with conditions for transportation according to the applicable regulations of the Department of Transportation. | TOTAL CHARGES \$ Freight charges on PREPARE unless otherwise noted. <input type="checkbox"/> Check box if charges are C |
|------------------------|--|---|--|

REF: 010 CORPORATION
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 708.969.1770, FAX: 708.969.8827

THE ABOVE P.O. NUMBER PLUS THE FOLLOWING NUMBER
 MUST APPEAR ON ALL INVOICES, PACKING SLIPS
 PACKAGES AND CORRESPONDENCE

VENDOR

MEN CHEMICAL, INC.
 2400 CURTISS STREET
 DOWNERS GROVE, IL 60515-0722
 708.969.1770, FAX: 708.969.8827

SHIP TO

REF INCRE CORPORATION
 P.O. BOX 100
 100 WOODLAW STREET
 DOWNERS GROVE, IL 60515-0100

SHIP VIA BEST RATE AVAILABLE

| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO. | TERMS | VALUE |
|---------------|----------|------------|---|-------|--------------------|
| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | BOUNDED BY PART BY |
| | | | REF INCRE CORPORATION P.O. BOX 100 100 WOODLAW STREET DOWNERS GROVE, IL 60515-0100 SHIPPING PER FAX DATED 9-23-94 | | |
| | | | P.O. VALUE \$1056.00 | | |

1005067

53

AP1 ELK AP2 GJB

282530

24

G

PARSLEY JONES

NE-13534

H35736

000117

COLEMAN

CHEMICAL
INC.

INVOICE

Remit To P.O. Box 2036, East Peoria, IL 61611
815) 727-3900

CUSTOMER NO.

REXNOR

BILL TO:

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

SHIP TO:

Rexnord, Inc.
2400 Curtiss Street
Downers Grove, IL 60515

| 08/10/94 | | UNAPPORTIONED | | Net 30 Days | | | |
|--|---------|---------------|------|-------------|---|--|-------|
| WB9-1424 | | 08/10/94 | | 15 | | | |
| 1000.00 | 1000.00 | 1.00 | lbs. | 82066692 | TRICHLOROETHYLENE 6600 R.D. - Reconditioned 55 Gal. Drum | 0.750 | 1.000 |
|  | | | | | | RECEIVED AUG 15 1994 REXNORD CORPO BEARING OPER. Non-taxable Subtotal 1.000 Taxable Subtotal 0 Tax 0 Total 1.000 | |
| | | | | | | 065.825 | |
| | | | | | | 815023 | |
| | | | | | | P J | |
| | | | | | | 000118 | |

DISCLAIMER: Coleman Chemical Inc. shall charge and purchase agent to pay, collect, and all interest and charges shall be charged to the customer's account. The customer shall be responsible for the payment of the invoice. The customer shall be responsible for the payment of the invoice. The customer shall be responsible for the payment of the invoice.

IMPORTANT: All products are sold without warranty of any kind, express or implied, including but not limited to fitness for a particular purpose, merchantability, or fitness for a particular purpose. The customer shall be responsible for the payment of the invoice. The customer shall be responsible for the payment of the invoice. The customer shall be responsible for the payment of the invoice.

NO CLAIMS FOR LOSS, DAMAGE OR LIABILITY ALLOWED AFTER DELIVERY IS MADE TO THE CUSTOMER IN ACCORDANCE WITH THE TERMS OF THIS INVOICE.

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

SHIPPER'S NO

| | | | |
|---------------------------------------|--------------|-------------------------|-----|
| NAME OF CARRIER COLEMAN TRK | CARRIER'S NO | DATE 08/10/94 | 155 |
|---------------------------------------|--------------|-------------------------|-----|

RECEIVED SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF THIS BILL OF LADING. THE PROPERTY DESCRIBED BELOW IS APPEARANT GROSS ORDER EXCEPT AS NOTED. CONTENTS AND CONDITION OF CONTENTS OF PACKAGES ARE NOT GUARANTEED AND DESIGNATED AS INDICATED ABOVE WHICH SAID CARRIER, THE WORD CARRIER BEING UNDERSTOOD THROUGHOUT THIS CONTRACT AS MEANING ANY PERSON OR CORPORATION IN POSSESSION OF THE PROPERTY UNDER THE CONTRACT, AGREES TO ITS USUAL DUTY OF DELIVERY AT SAID DESTINATION AT OR NEAR THE ROUTE, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION IF IT IS MUTUALLY AGREED AS TO EACH CARRIER OR AS TO ANY OF SAID PROPERTY OVER ALL OR ANY PORTION OF THE JOURNEY AND AS TO EACH PARTY AT ANY TIME INTERESTED IN ALL OR ANY OF SAID PROPERTY THAT EVERY SERVICE TO BE PERFORMED HEREUNDER SHALL BE SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC STRAIGHT BILL OF LADING OR UNIFORM FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREOF, IF THIS IS A RAIL OR A RAIL-WATER SHIPMENT, OR 21 IN THE APPLICABLE MOTOR CARRIER CLASSIFICATION OF TARIFF IF THIS IS A MOTOR CARRIER SHIPMENT. SHIPPER HEREBY CERTIFIES THAT HE IS A SHIPPER AND ACCORDS TO THESE AND HIS OBLIGATIONS.

| | |
|--|---|
| FROM: Coleman Chemical Inc. Joliet, Illinois 60434 (815) 727-3900 | TO: Graphic Arts Spec. |
| SHIPPER: | CONSIGNEE |
| | STREET 1630 N. Kingsbury Chicago, IL 60614 |
| | DESTINATION |

| | | |
|------------------------------|------------------|----------------|
| DELIVERING CARRIER 42 | ROUTE 117 | VEHICLE NUMBER |
|------------------------------|------------------|----------------|

| NO. PACKAGES | HM | KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (SUBJECT TO CORR.) | CLASS OR RATE | ✓ | CHARGE FOR CARRIER | | | | | | | | | | | | | | | | | | | | | |
|------------------------|-------------------|--|---------------------------|-------------------|---|--------------------|--|-------------------------------------|--|--|---------------------------|--|--|-------------------------------------|--|--|---------------------------|--|--|---------------------------------|--|--|--------------------------|--|--|--|--|
| 3 <i>DAS</i> | | NON-HAZARDOUS BLEND #4 55 GAL NEW DRUM | 1320 | | | | | | | | | | | | | | | | | | | | | | | | |
| | | CUSTOMER PO# 921. NEW GREEN DRUMS. NO COLEMAN MARKINGS ON DRUMS. CODE NAME ON TOP & SIDES OF DRUM, LOT# ON SIDES OF DRUM, LABELS ON STRAIGHT, DRUM SEALS ON BUNGS. NO DENTS OR WILL BE REFUSED. CUSTOMER OPEN S AT 7:30 A.M. NEEDS EARLY DELIVERY. DELIVER 8/11/94. CUSTOMER RECEIVES CREDIT FOR EMPTY GREEN DRUMS. PLEASE MARK B/L ACCORDINGLY. | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | COLEMAN | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"> <thead> <tr> <th>QUANTITY REQUESTED</th> <th>QUANTITY RETURNED</th> <th></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>15 Gal. S.S. (Metric) @ 350.00 each</td> </tr> <tr> <td></td> <td></td> <td>15 Gal. Poly @ 25.00 each</td> </tr> <tr> <td></td> <td></td> <td>55 Gal. S.S. (Metric) @ 550.00 each</td> </tr> <tr> <td></td> <td></td> <td>55 Gal. Poly @ 45.00 each</td> </tr> <tr> <td></td> <td></td> <td>55 Gal. Steel Drum @ 25.00 each</td> </tr> <tr> <td></td> <td></td> <td>55 Gal. Non-Special Drum</td> </tr> </tbody> </table> | QUANTITY REQUESTED | QUANTITY RETURNED | | | | 15 Gal. S.S. (Metric) @ 350.00 each | | | 15 Gal. Poly @ 25.00 each | | | 55 Gal. S.S. (Metric) @ 550.00 each | | | 55 Gal. Poly @ 45.00 each | | | 55 Gal. Steel Drum @ 25.00 each | | | 55 Gal. Non-Special Drum | | | | |
| QUANTITY REQUESTED | QUANTITY RETURNED | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 15 Gal. S.S. (Metric) @ 350.00 each | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 15 Gal. Poly @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 55 Gal. S.S. (Metric) @ 550.00 each | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 55 Gal. Poly @ 45.00 each | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 55 Gal. Steel Drum @ 25.00 each | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 55 Gal. Non-Special Drum | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <i>NT Steel 350 per Page 1</i> | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | 1320 | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|--------------------------------|-----------------|-------------|--|
| RECEIVED BY <i>[Signature]</i> | COLEMAN DRIVER: | C.O.D. AM.S | C.O.B. FEE: <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT \$ |
|--------------------------------|-----------------|-------------|--|

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. Shipper's weight in lieu of stamp, not a part of Bill of Lading approved by the Interstate Commission.

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

| | | | |
|-----------------------|--|---|------------------|
| BULK HOOD-UP OK'D BY: | PLACARDS OFFERED TO CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO ACCEPTED BY CARRIER <input type="checkbox"/> YES <input type="checkbox"/> NO | This is to certify that the above named interests are duly covered by insurance for transportation according to the conditions of the policy. | MSGS RECEIVED BY |
| | | FOR EMERGENCY ASSISTANCE INVOLVING HAZARDOUS CHEMICALS CALL: CHEMTREC 800-424-9300 DAY OR NIGHT | 000119 |

Rexnord Corporation
 2400 Curtiss Street
 Caller No. 1482
 Downers Grove, IL 60515-0722
 708/969-1770 FAX: 708/969-8827

No. THE ABOVE P.O. NUMBER PLUS THE FOLLOWING NUMBER

MUST APPEAR ON ALL INVOICES, PACKING SLIPS, PACKAGES AND CORRESPONDENCE

VENDOR
 HANSON METALS
 WENSTAR LANE

SHIP TO
 REYNOLDS...
 1234...
 CALLER NUMBER 1482
 DOWNERS GROVE...

SHIP VIA BEST WAY AIRMAIL

CONFIRMED WITH BARBARA

| | | | | | |
|---------------|-------|------------|--------------------|-------|-------|
| DATE OF ORDER | BUYER | TAX EXEMPT | ILLINOIS RESALE NO | TERMS | VALUE |
| | | TAXABLE | | | |

| ITEM | QUANTITY | PUM | DESCRIPTION | PRICE | ISSUED IN PART BY | PRO |
|------|----------|-----|---|------------|-------------------|-----|
| | | LS | PER PART M35736 TRICHLOROETHYLENE GAS GAL DRUM 550 LBS/DRUM ***CONFIRMING PHONE ORDER - INTERNAL RELEASE FOR ACCTG*** | | | |
| | | | | P.O. VALUE | \$1016.40 | |

Signature

819023

API EJK AP2 GJB

Signature

282530

M35736

ME-92142

Instructions for this form found on pages 17-32. Also SEE Common Errors on page 7 of the instructions.

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Discharging Operation Spent Trick Leach Solution
B. EPA Hazardous Waste Code: EQ01
C. SIC code: 3562
D. Origin Code: 55 System type: M
E. Source Code: A07
F. Point of Measurement: 58 G. Waste form code: B202
H. Radioactive mixed: 2 I. TRI Constituent: 1 (if 1 or 2, go to section 2)
J. CAS numbers) 1. _____ 2. _____ 3. _____
(From Form R) 4. _____ 5. _____

SECTION 2. QUANTITY GENERATED

A. UOM: 1 Density: 12 lb/gal (Same unit and density must be used for all quantities on this page).
Quantity generated in: B. Previous reporting year: 55.0
C. Current reporting year: 32.0
D. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in exempt or regulated treatment, recycling, or disposal units at this location? N Y = Yes (continue to system 1) N = No (skip to section 3)
On-Site System 1: System Type M Status 126 Quantity managed on-site this year: _____
On-Site System 2: System Type M Status 181 Quantity managed on-site this year: _____

SECTION 3. OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No (Skip to Section 4)
SITE 1. Name and address of facility: DETREX CORP, 2527 Le Royne, Norcross Park, IL 6016
B. U.S. EPA ID No. of facility waste was shipped to: ILD074424938
C. System type shipped to: M03 D. Off-site availability code: 1
E. Total quantity shipped in this reporting year: 32.0
SITE 2. Name and address of facility:
B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to: M D. Off-site availability code: _____
E. Total quantity shipped in this reporting year: _____

SECTION 4. WASTE MINIMIZATION ACTIVITIES

A. Did you engage in any waste minimization activities for this reporting year? N Y = Yes (Cont to Box B) N = No (Cont to Section 5)
B. Activity: W W W W W W C. Other Effects? (Y = Yes, N = No) _____
D. How many new waste minimization activities were implemented in this reporting year for this waste? _____ (Number)
E. Quantity recycled in reporting year due to new activities: _____
F. Activity/Production index: _____ G. Source Reduction quantity due to new activities: _____

SECTION 5. REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section 3)? (Y=Yes, N=No) N
B. Did this site store RCRA wastes on-site for more than 90 days and waste is still in storage at year end: (Y=Yes, N=No) N
Quantity stored at year end and for 90 days or more, generated this reporting year: _____
Quantity stored at year end that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page 8
293 13

Instructions for this form found on pages 17-32. Also SEE Common Errors on page 7 of the instructions.

SECTION 1. WASTE DESCRIPTION

A. Waste Description: De-Greasing Operations, Spent Trichloroethylene
B. EPA Hazardous Waste Code: F001
C. SIC code: 3562
D. Origin Code: 1 System type: M
E. Source Code: A02
F. Point of Measurement: 1
G. Waste form code: B202
H. Radioactive mixed: 2
I. TRI Constituent: 1 (if 1 or 2, go to section 2)
J. CAS numbers } 1. _____ 2. _____ 3. _____
(From Form R) 4. _____ 5. _____

SECTION 2. QUANTITY GENERATED

A. UOM: lb Density: 12.12 lb/gal (Same unit and density must be used for all quantities on this page).

Quantity generated in: B. Previous reporting year: 85.0
C. Current reporting year: 52.0

D. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in exempt or regulated treatment, recycling, or disposal units at this location? N Y = Yes (continue to system 1) N = No (skip to section 3)

On-Site System 1: System Type M Status 128 Quantity managed on-site this year: _____
On-Site System 2: System Type M Status 181 Quantity managed on-site this year: _____

SECTION 3. OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No (Skip to Section 4)

SITE 1. Name and address of facility: DETROY CORP, 2537 LEMOYNE, MELROSE PARK, IL 60166

B. U.S. EPA ID No. of facility waste was shipped to: ILD07442493B
C. System type shipped to: M D. Off-site availability code: 1
E. Total quantity shipped in this reporting year: 55.0

SITE 2. Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to: M D. Off-site availability code: _____
E. Total quantity shipped in this reporting year: _____

SECTION 4. WASTE MINIMIZATION ACTIVITIES

A. Did you engage in any waste minimization activities for this reporting year? N Y = Yes (Cont to Box B) N = No (Cont to Section 5)

B. Activity: W W W W W W C. Other Effects? (Y = Yes, N = No) _____
228 231 234 237 240 243 248

D. How many new waste minimization activities were implemented in this reporting year for this waste? _____ (Number)
247

E. Quantity recycled in reporting year due to new activities: _____
248

F. Activity/Production index: _____ G. Source Reduction quantity due to new activities: _____
258 261

SECTION 5. REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section 3)? (Y=Yes, N=No) N

B. Did this site store RCRA wastes on-site for more than 90 days and waste is still in storage at year end: (Y=Yes, N=No) N

Quantity stored at year end and for 90 days or more, generated this reporting year: _____
273

Quantity stored at year end that was generated prior to this reporting year: _____
283

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page _____
293 13 000122 9

Instructions for this form found on pages 17-32.

SECTION 1. WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS, SPENT TRICHLOROETHYLENE
B. EPA Hazardous Waste Code: F001
C. SIC code: 3563
D. Origin Code: 1 System type: M E. Source Code: A07
F. Point of Measurement: 1 G. Waste form code: B
H. Radioactive mixed: 2 I. TRI Constituent: 1
J. CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

SECTION 2. QUANTITY GENERATED

A. UOM: lb Density: 12.12 (Same unit and density must be used for all quantities on this page).
Quantity generated in: B. Previous reporting year: 165.0
C. Current reporting year: 85.0
D. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in exempt or regulated treatment, recycling, or disposal units at this location? N Y = Yes (continue to system 1) N = No (skip to section 3)
On-Site System 1: System Type M Status _____ Quantity managed on-site this year: _____
On-Site System 2: System Type M Status _____ Quantity managed on-site this year: _____

SECTION 3. OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No (Skip to Section 4)
SITE 1. Name and address of facility: DETEX CORP. 2537 W MOYNE, PURDUE PARK # 6016
B. U.S. EPA ID No. of facility waste was shipped to: ILD074424938
C. System type shipped to: M02L D. Off-site availability code: L
E. Total quantity shipped in this reporting year: 85.0
SITE 2. Name and address of facility:
B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to: M D. Off-site availability code: _____
E. Total quantity shipped in this reporting year: _____

SECTION 4. WASTE MINIMIZATION ACTIVITIES

A. Did you engage in any waste minimization activities for this reporting year? N Y = Yes (Cont to Box B) N = No (Cont to Section 5)
B. Activity: W W W W W W C. Other Effects? (Y = Yes, N = No) _____
D. How many new waste minimization activities were implemented in this reporting year for this waste? _____ (Number)
E. Quantity recycled in reporting year due to new activities: _____
F. Activity/Production index: _____ G. Source Reduction quantity due to new activities: _____

SECTION 5. REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section 3)? (Y=Yes, N=No) N
B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y=Yes, N=No) N
Quantity stored at year end and for 90 days or more, generated this reporting year: 0.0
Quantity stored at year end that was generated prior to this reporting year: 0.0

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page 6

| | | | |
|--|--|--|--|
| SECTION 1. WASTE DESCRIPTION | | | |
| A. Waste Description: DEGREASING OPERATIONS, SPENT TRICHLOROETHYLENE | | | |
| B. EPA Hazardous Waste Code(s): Code 1: F001 Code 2: Code 3: Code 4: | | | |
| C. SIC Code: 3562 Code 5: | | | |
| D. Origin Code: 1 On-site System Type: | | | |
| E. Source Code 1: A07 Source Code 2: Source Code 3: | | | |
| F. Point of Measurement: 1 G. Waste Form Code: B202 | | | |
| H. Radioactive Mixed: 2 I. TRI (Toxic Release Inventory) Constituent: 1 | | | |
| J. CAS Numbers: 1. 2. 3. 4. 5. | | | |
| SECTION 2. QUANTITY GENERATED | | | |
| A. UOM: 1 Density: 12.12 lbs/gal (Same unit and density must be used for all quantities on this page) | | | |
| Quantity generated in: B. Previous reporting year: 110.0 | | | |
| C. Current reporting year: 165.0 | | | |
| D. QUANTITY MANAGED ON-SITE Did this location manage some or all of this waste in exempt or regulated treatment, recycling, or disposal units at this location? N Y = Yes (continue to system 1) N = No (skip to Section 3) | | | |
| On-site system 1: System Type: Status: Quantity managed on-site this year: 0.0 | | | |
| On-site system 2: System Type: Status: Quantity managed on-site this year: 0.0 | | | |
| SECTION 3. OFF-SITE SHIPMENT | | | |
| A. Was any of this waste shipped off-site this reporting year? Y Y=YES (Continue to Site 1) N=No (Skip to Section 4) | | | |
| SITE 1. Name and address of facility: WASTE RESOURCE & RECLAMATION, EAU CLAIRE, WI 54701 | | | |
| B. U.S. EPA ID Number of facility waste was shipped to: WID990629475 | | | |
| C. System type shipped to: M021 D. Off-site availability code: 1 | | | |
| E. Total quantity shipped in this reporting year: 55.0 | | | |
| SITE 2. Name and address of facility: DETREX CORP, MELROSE PARK, IL 60160 | | | |
| F. U.S. EPA ID Number of facility waste was shipped to: ILD074424938 | | | |
| G. System type shipped to: M021 D. Off-site availability code: 1 | | | |
| I. Total quantity shipped in this reporting year: 110.0 | | | |
| SECTION 4. WASTE MINIMIZATION ACTIVITIES | | | |
| A. Did you engage in any waste minimization activities in this reporting year? Y Y = Yes (Continue to Box B) N = No (Continue to Section 5) | | | |
| B. Activity 1: W54 Activity 2: W52 Activity 3: Activity 4: Activity 5: Activity 6: | | | |
| C. Other effects: | | | |
| D. How many new waste minimization activities were implemented in this reporting year for this waste? | | | |
| E. Quantity recycled in reporting year due to new activities: 0.0 | | | |
| F. Activity/Production Index: 0.00 G. Source reduction quantity due to new activities: 0.0 | | | |
| SECTION 5. REGULATED STORAGE | | | |
| A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site indicated in Section 3)? N | | | |
| B. Did this site store RCRA wastes on-site for more than 90 days, but waste remained in storage at year end? N | | | |
| Quantity stored at year end for 90 days or more, generated this reporting year: 0.0 | | | |
| Quantity stored at year end that was generated prior to this reporting year: 0.0 | | | |
| Comments: N | | | |

Instructions for this form found on pages 12-27.

SECTION 1. WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS SPENT TRICHLOROETHYLENE

B. EPA Hazardous Waste Code: 201

C. SIC code: 3562

D. Origin Code: 1 System type: M E. Source Code: A07

F. Point of Measurement: ↓ G. Waste form code: 8202

H. Radioactive mixed: 2 I. TRI Constituent: 1

J. CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

SECTION 2. QUANTITY GENERATED

A. UOM: 1 Density: 2.80 (Same unit and density must be used for all quantities on this page).

Quantity generated in: B. Previous reporting year: 55.0

C. Current reporting year: 110.0

D. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in exempt or regulated treatment, recycling, or disposal units at this location? N Y = Yes (continue to system 1) N = No (stop to section 3)

On-Site System 1: System Type M Status 185 Quantity managed on-site this year: _____
On-Site System 2: System Type M Status 187 Quantity managed on-site this year: _____

SECTION 3. OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No (Skip to Section 4)

SITE 1. Name and address of facility: WASTE RESEARCH & RECLAMATION, ROUTE 7, EAU CLAIRE, WI. 54701

B. U.S. EPA ID No. of facility waste was shipped to: WID290889475

C. System type shipped to: M021 D. Off-site availability code: 1

E. Total quantity shipped in this reporting year: 110.0

SITE 2. Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. System type shipped to: M D. Off-site availability code: _____

E. Total quantity shipped in this reporting year: _____

SECTION 4. WASTE MINIMIZATION ACTIVITIES

A. Did you engage in any waste minimization activities for this reporting year? N Y = Yes (Cont to Box B) N = No (Cont to Section 5)

B. Activity W W W W W W C. Other Effects? (Y = Yes, N = No) _____

D. How many new waste minimization activities were implemented in this reporting year for this waste? _____ (Number)

E. Quantity recycled in reporting year due to new activities: _____

F. Activity/Production index _____ G. Source Reduction quantity due to new activities: _____

SECTION 5. REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section 3)? (Y=Yes, N=No)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y=Yes, N=No)

Quantity stored at year end and for 90 days or more, generated this reporting year: _____

Quantity stored at year end that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page 9

Instructions for this form found on pages 13 - 28.

Sec. I WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS, SPENT TRICHLOROETHYLENE
B. EPA Hazardous Waste Code 31 201 35 30 43 47
C. SIC code 3562
D. Origin Code 1 System type M E. Source Code A07 A A
F. Point of measurement 1 G. Waste form code B202
H. Radioactive mixed 2 I. TRI Constituent 1
J. CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 11.2 - 2.0 lbs/gal (Same unit and density must be used for all quantities on this page)
Quantity generated in: B. Previous reporting year 1100 C. Current reporting year 33
D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N Y = Yes (Continue to System 1) N = No (Skip to Sec. III)
On-Site System 1: System Type M Status 146 Quantity managed on-site this year 147
On-Site System 1: System Type M Status 181 Quantity managed on-site this year 188

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No (Skip to Sec. IV)
SITE 1: Name and address of facility: WASTE RESEARCH AND RECLIMATION
Route 7
Eau Claire, WI 54701
B. U.S. EPA ID No. of facility waste was shipped to: WI 990829475
C. System type shipped to M021 D. Off-site availability code 1
E. Total quantity shipped in this reporting year: 55.0
SITE 2: Name and address of facility:
B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to M D. Off-site availability code _____
E. Total quantity shipped in this reporting year: _____

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year resulting minimization of this waste? N Y = Yes (Cont. to Box B) N = No (Cont. to Sec. V)
B. Activity W W W W C. Other effects (Y=Yes, N=No) 246
D. Quantity recycled in reporting year due to new activities 241
E. Activity/production index 251 F. Reporting year Source reduction quantity 254

Sec. V. REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N
B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y=Yes, N=No) N
Quantity stored at year end and for 90 days or more that was generated this reporting year: _____
Quantity stored at year end that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y(Yes) if you have comments regarding this page and attach extra sheet. Page 9

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS, SPENT TRICHLOROETHYLENE

B. EPA Hazardous Waste Code F 0 0 1

C. SIC code 2 8 2

D. Origin Code 1 System type M

E. Source code A 0 7 A A

F. Point of measurement 1

G. Waste form code B 2 2

H. Radioactive mixed 2

I. TRI constituent 1

J. CAS numbers: 1. 1 2. 2 3. 3
 4. 4 5. 5

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 2 2 2 lbs/gal (Same unit and density must be used for all quantities on this page)

Quantity generated in: B. Previous reporting year 1 5 0 C. Current reporting year 1 0

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? Y Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M Quantity managed on-site this year 2 1

On-Site System 2: System Type M Quantity managed on-site this year 3 8

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility: WASTE RESEARCH & RECLIMATION
ROUTE 7
EAU CLAIRE, WI. 54701

B. U.S. EPA ID No. of facility waste was shipped to: W I D 9 9 0 8 2 9 4 7 5

C. System type shipped to M 0 2 1 D. Off-site availability code 1

E. Total quantity shipped in this reporting year: 1 1 0 0

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: 1 9 7

C. System type shipped to M D. Off-site availability code 2 1 3

E. Total quantity shipped in this reporting year: 2 1 4

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W W W W C. Other effects (Y=Yes, N=No) 2 3 7

D. Quantity recycled in reporting year due to new activities 2 3 8

E. Activity/production index 2 3 9 F. Reporting year Source reduction quantity 2 4 1

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) Y

Quantity stored at year end and for 90 days or more that was generated this reporting year: 2 5 0

Quantity stored at year end that was generated prior to this reporting year: 2 7 3

COMMENTS: 2 6 0 Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A Waste Description: DEGREASING OPERATIONS, SPENT TRICHLOROETHYLENE

B EPA Hazardous Waste Code F 0 0 1

C SIC code 3 5 6 2

D Origin Code 1 System type M

E. Source code A 0 7

F Point of measurement 1

G. Waste form code B 2 0 2

H Radioactive mixed 2

I. TRI constituent 1

J CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 1 2 2 0 lbs/gal (Same unit and density must be used for all quantities on this page)

Quantity generated in: B Previous reporting year _____ C. Current reporting year 1165

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M Quantity managed on-site this year _____

On-Site System 2: System Type M Quantity managed on-site this year _____

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility: WASTE RESEARCH & RECLINATION
ROUTE 7
EAU CLAIRE, WI. 54701

B. U.S. EPA ID No. of facility waste was shipped to: I D 9 9 0 8 2 9 4 7 5

C. System type shipped to M 0 2 1 D. Off-site availability code 1

E. Total quantity shipped in this reporting year: 1 6 5 0

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. System type shipped to M D. Off-site availability code _____

E. Total quantity shipped in this reporting year: _____

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W W W W C. Other effects (Y=Yes, N=No) _____

D. Quantity recycled in reporting year due to new activities _____

E. Activity/production index _____ F. Reporting year Source reduction quantity _____

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N

Quantity stored at year end and for 90 days or more that was generated this reporting year: _____

Quantity stored at year end that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

Instructions for this form found on pages 13 - 24.

Sec. I WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS, SPENT 1-1-1 TRICHLOROETHANE
B. EPA Hazardous Waste Code F 0 0 1
C. SIC code 3 5 6 2
D. Origin Code 1 System type M
E. Source code A 0 7
F. Point of measurement 1
G. Waste form code B 2 0 2
H. Radioactive mixed 2
I. TRI constituent 1
J. CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 9 . 0 lb/gal (Same unit and density must be used for all quantities on this page)
Quantity generated in: B. Previous reporting year _____ C. Current reporting year _____
D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III)
On-Site System 1: System Type M Quantity managed on-site this year _____
On-Site System 2: System Type M Quantity managed on-site this year _____

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)
Site 1: Name and address of facility: Avganic Industries
114 N. Main St.
Cottage Grove, WI 53527
B. U.S. EPA ID No. of facility waste was shipped to: W I D 0 0 0 8 0 8 8 2 4
C. System type shipped to M 0 2 2 D. Off-site availability code 1
E. Total quantity shipped in this reporting year: _____ 1 1 0 . 0
Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to M D. Off-site availability code HS
E. Total quantity shipped in this reporting year: _____

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)
B. Activity W W W W C. Other effects (Y=Yes, N=No) _____
D. Quantity recycled in reporting year due to new activities _____
E. Activity/production index _____ F. Reporting year Source reduction quantity _____

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N
B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end? (Y= Yes, N= No) N
Quantity stored at year end and for 90 days or more that was generated this reporting year: _____
Quantity stored at year end that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

Instructions for this form found on pages 14 - 31.

Sec. I WASTE DESCRIPTION

A. Waste Description: DEGREASING OPERATIONS, SPENT 1-1-1 TRICHLOROETHANE
B. EPA Hazardous Waste Code F 0 0 1
C. SIC code 3 5 6 2
D. Origin Code 1 System type M
E. Source code A 0 7
F. Point of measurement 1
G. Form code B 2 0 2
H. Radioactive mixed 2
I. TRI constituent 1
J. CAS numbers: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 9.0 bagal (Same unit and density must be used for all quantities on this page)
B. Quantity generated in previous reporting year _____ C. Current reporting year _____
D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? Y= Yes (Continue to System 1) N= No (Skip to Sec. III)
On-Site System 1: System Type M Quantity managed on-site this year _____
On-Site System 2: System Type M Quantity managed on-site this year _____

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)
Site 1: Name and address of facility: Avganic Industries
114 N. Main St.
Cottage Grove, WI 53527
B. U.S. EPA ID No. of facility waste was shipped to: W I D 0 0 0 8 0 8 8 2 4
C. System type shipped to M 0 2 2 D. Off-site availability code 1
E. Total quantity shipped in this reporting year: 1 6 5 0
Site 2: Name and address of facility: _____

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. System type shipped to M D. Off-site availability code _____
E. Total quantity shipped in this reporting year: _____

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)
B. Activity W W W W C. Other effects (Y=Yes, N=No) _____
D. Quantity recycled in reporting year due to new activities _____
E. Activity/production index _____ F. Reporting year Source reduction quantity _____

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N
B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N
Quantity stored that was generated this reporting year: _____
Quantity stored that was generated prior to this reporting year: _____

COMMENTS: _____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.



217/782-6761

Refer to: 0430300003 -- DuPage County
Downers Grove -- Rexnord, Inc.
ILD005455571

March 10, 1986

Rexnord, Inc. -- Roller Bearing Div.
Attention: Rudy Fuys
2400 Curtiss Street
Downers Grove, Illinois 60515

Dear Mr. Fuys:

On February 6, 1986 your facility was inspected by James K. Wiggins of the Illinois Environmental Protection Agency. The purpose of this inspection was to determine your facility's compliance with 35 Illinois Administrative Code, Part 722, Subpart(s) A, B, C, D, and E. At the time of the inspection, no apparent violations of the requirements addressed as part of the inspection were observed. For your information a copy of the inspection report is enclosed.

In addition, the apparent violations cited in our April 12, 1985 Compliance Inquiry Letter and June 18, 1985 Pre-Enforcement Conference Letter have been reviewed and resolved.

Should you have any questions regarding the inspection, please contact James K. Wiggins at 312/345-9780.

Should you have any questions regarding the previous violations, please contact Andy Vollmer at 217/782-6762.

Sincerely,

Mark A. Haney, Manager
Facilities Compliance Unit
Compliance Monitoring Section
Division of Land Pollution Control

MAH:MT:dks/508f, 104

Enclosure

cc: Division File
Northern Region
Don Gimbel
James Wiggins
Andy Vollmer
Michelle Tebrugge

000134

April 16, 1985

Corporate Offices
350 N. Sunny Slope
Brookfield, WI 53005
414/797-6900

TWX: 910/262-3405
TELEX: 26-727

Mark A. Haney, Manager
Facilities Compliance Unit
Compliance Monitoring Section
Division of Land Pollution Control
Illinois EPA
2200 Churchill Road
Springfield, IL 62706

References: 0430300003--DuPage County/FA 133
Downers Grove/Rexnord ILD 005455571

2010300032--Winnebago County/FA 133
Rockford/Rockford Products Plant #2 ILD 000805895

2010300031--Winnebago County/FA 133
Rockford/Rockford Products Plant #3 ILD 005212097

Dear Mr. Haney:

Confirming our telephone conversation of April 16, 1985, you have granted Rexnord's request for an extension of time until May 17, 1985 to satisfactorily respond to your letters of April 5 and April 12 regarding the above-referenced facilities.

Very truly yours,

Rexnord Inc.



Aaron L. Hardt
Environmental Counsel
Legal Department
(414)797-5687

/lml

cc: R. Muehl

ALH:0416206R

000141

July 10, 1985

Corporate Offices
350 N. Sunny Slope
Brookfield, WI 53005
414/797-6900

TWX: 910/262-3405
TELEX: 26-727

Illinois Environmental Protection Agency
Division of Land Pollution Control
2200 Churchill Road
Springfield, IL 62706

Attn: Michelle Tebrugge
Facilities Compliance Unit
Compliance Monitoring Section

References: 0430300003 - Du Page County/FA 133
Downers Grove/Rexnord ILD 005455571

Gentlemen:

This letter is in response to your letter to me dated June 18, 1985, signed by Michael F. Nechvatal and requesting me to attend a Pre-Enforcement Conference in Springfield, IL on July 10, 1985. Subsequent to my receipt of that letter, I had several telephone conversations with Mark Haney, Andy Vollmer, Eugene Dingledine and Michelle Tebrugge. Mr. Dingledine informed me that he needs two additional facts regarding the Closure Plan for Rexnord's Downers Grove facility and that I could send them to you by mail, in lieu of attending the conference on July 10. On July 3, I informed Ms. Tebrugge that I would not be attending the conference on July 10.

The information specifically requested by Mr. Dingledine is:

1. The estimated year of closure of the storage facility at the Rexnord Downers Grove operation is 1985. Thereafter, the storage facility will be operated as a RCRA Generator's accumulation area pursuant to 35 Ill. Adm. Code 722.134. Specific details regarding the closing of this facility were mailed on May 15, 1985 to Rama K. Chaturvedi and on May 16, 1985 to Mark Haney. Included in those specific details was a letter dated May 7, 1985 from Rexnord to USEPA - Region V requesting withdrawal of the Part A application submitted by the Downers Grove facility on November 3, 1980 and explaining that several other tanks and containers were inadvertently included in that Part A application. It is respectfully

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submitted that those inadvertently included tanks and containers are not regulated by RCRA. However, it is estimated that they will be closed in the year 2001.

2. The estimated quantity of sludge to be hauled on closure of the Plating Department is 28,000 gallons. However, it is again respectfully submitted that all tanks and containers in the Plating Department were inadvertently included in the Part A application and are not subject to the RCRA regulations.

If you have any questions regarding the statements in this letter, please do not hesitate to contact us about them.

Very truly yours,

Rexnord Inc.

Aaron L. Hardt
Environmental Counsel
Legal Department
(414) 797-5687

/mez

bcc: R. Fuys (attachment)
J. Lorenzen
V. Smith

ALH:0710416P



217/782-6761

Refer to: 0430300003 -- DuPage County FA133
Downer's Grove/Rexnord
ILD005455571

PRE-ENFORCEMENT CONFERENCE LETTER

Certified # P 731 918 921

June 18, 1985

Aaron L. Hardt
Rexnord, Inc.
350 N. Sunny Slope
Brookfield, Wisconsin 53005

Dear Mr. Hardt:

The Agency has previously informed Rexnord, Inc. of apparent violations of the Illinois Environmental Protection Act and/or rules and regulations adopted thereunder. These apparent violations are set forth in Attachment A of this letter.

As a result of these apparent violations, it is our intent to refer this matter to the Agency's legal staff for the preparation of a formal enforcement case. The Agency's legal staff will, in turn, refer this matter to the Office of Attorney General or to the United States Environmental Protection Agency for the filing of a formal complaint.

Prior to taking such action, however, you are requested to attend a Pre-Enforcement Conference to be held at the Division of Land Pollution Control, 2200 Churchill Road, Springfield, Illinois 62706. The purpose of this Conference will be:

1. To discuss the validity of the apparent violations noted by Agency staff, and
2. To arrive at a program to eliminate existing and/or future violations.

You should, therefore, bring such personnel and records to the conference as will enable a complete discussion of the above items. We have scheduled the Conference for July 10, 1985, at 10:00 a.m. If this arrangement is inconvenient, please contact Michelle Tebrugge at 217/782-4462 to arrange for an alternative date and time.



Page 2

In addition, please be advised that this letter constitutes the notice required by Section 31(d) of the Illinois Environmental Protection Act prior to the filing of a formal complaint. The cited Section of the Illinois Environmental Protection Act requires the Agency to inform you of the charges which are to be alleged and offer you the opportunity to meet with appropriate officials within thirty days of this notice date in an effort to resolve such conflict which could lead to the filing of formal action.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael F. Nechvatal".

Michael F. Nechvatal, Manager
Compliance Monitoring Section
Division of Land Pollution Control

MFN:MT:jd/1322E/1-2

Attachment

cc: Division File
Region
Northern
Paul Jagiello
Andy Vollmer
Michelle Tebrugge

000138



Attachment A

1. Pursuant to 35 Ill. Adm. Code 725.211, the owner or operator must close his facility in a manner that minimizes the need for further maintenance and controls, minimizes or eliminates, to the extent necessary to protect human health and the environment, post-closure escape of hazardous waste, hazardous waste constituents, leachate, contaminated rainfall or waste decomposition products to the ground or surface waters or to the atmosphere. You are in apparent violation of 35 Ill. Adm. Code 725.211 for the following reason(s): You have failed to show how and when decontamination will be carried out; type of cleaning material and equipment to be used; disposal of cleaning wastes and residues; list of piping, equipment, tanks and structures to be decontaminated; tests for contamination; soil testing; and disposal of soil if it is contaminated.
2. Pursuant to 35 Ill. Adm. Code 725.212(a), by May 19, 1981, the owner or operator must have a written closure plan. A copy of the closure plan and all revisions must be kept at the facility until closure is completed and certified. The closure plan must include at least:
 - a. A description of how and when the facility will be partially closed, if applicable, and finally closed. The plan must identify how the requirements of Sections 725.211, 725.213, 725.214 and 725.215 and applicable requirements of 725.297, 725.328, 725.380, 725.410, 725.451, 725.481 and 725.504 will be met;
 - b. An estimate of the maximum inventory of wastes in storage and in treatment at any time during the life of the facility;
 - c. A description of the steps needed to decontaminate facility equipment during closure;
 - d. An estimate of the expected year of closure and a schedule for final closure;
 - e. A provision for closure certification by an independent registered professional engineer.

You are in apparent violation of 35 Ill. Adm. Code 725.212(a) for the following reason(s): You have failed to meet the requirements of conditions a, b, and d.

MT:jd/1322E/3

May 16, 1985

Corporate Offices
350 N. Sunny Slope
Brookfield, WI 53005
414/797-6900

TWX: 910/262-3405
TELEX: 26-727

Mark A. Haney, Manager
Facilities Compliance Unit
Compliance Monitoring Section
Division of Land Pollution Control
Illinois EPA
2200 Churchill Road
Springfield, IL 62706

References: 0430300003--DuPage County/FA 133
Downers Grove/Rexnord ILD 005455571

Dear Mr. Haney:

Responsive to your letter of April 12, 1985 to Rexnord concerning our above-referenced facility and inquiring as to our position with respect to the apparent violations identified in Attachment A thereto and our plans to correct these apparent violations, we are pleased to inform you that these apparent violations have been corrected. A copy of our letter to Rama K. Chaturvedi and all attachments thereto are enclosed herewith for your perusal.

Very truly yours,

Rexnord Inc.

Aaron L. Hardt
Environmental Counsel
Legal Department
(414)797-5687

/lml

bcc: R. Fuys (Bearings)
J. Lorenzen (CH)
R. Muehl (CH)
V. Smith (CH)

ALH:0514206R

000140



Mechanical Power Division
Roller Bearing Operation
2400 Curtiss Street
Caller No. 1482
Downers Grove, IL 60515
312/969-1770
TWX 910/695-3224

May 7, 1985

Mr. John Perry
Emergency Response Unit
Illinois EPA
2200 Churchill Road
Springfield, IL 62704

Dear Mr. Perry:

For your information, the work Jim Maloney had discussed with you has been completed. A letter from Petrochem Services, Inc. is attached.

Sincerely,

Rudolph A. Fuys
Plant Metallurgist

f

Attachment

cc Aaron Hardt
Rexnord - Milwaukee

000142





Copy to: John Perry
Lawrence Easte
Karl J. Klepitsc
Rama K. Chatur
Mark A. Hane

Petrochem Services, Inc. P.O. Box 337 Lemont, Illinois 60439

(312) 739-1150

April 30, 1985

Mr. Rudy Fuys
Mechanical Power Division
REXNORD
2400 Curtiss Street
Downers Grove, IL 60515

Dear Mr. Fuys:

Petrochem has completed its spill response action at Rexnord in Downers Grove pertaining to the cutting oil storage tank leak. As a follow up to the spill notification provided to the Illinois EPA, the following description of the spill mitigation action taken by Petrochem is provided.

In late March Rexnord contacted Petrochem about a 3000 gallon underground storage tank that appeared to have begun leaking. The contents of the tank had been recently removed for off-site disposal. However, plant maintenance personnel reported that the tank began to immediately refill.

To determine if the tank was leaking, Petrochem recommended that 4 - 5 observation wells be installed. Those were installed March 28th and two of the wells immediately filled with what appeared to be cutting oil from the underground tank. The three other wells showed no contamination.

After consultation, it was decided that the best course of action was to remove the tank and any contamination that may be present. On April 4, 1985, Petrochem started work on removing the tank. On April 5th the tank was removed.

At that time the lab results on the soil samples collected from the observation wells were completed. The lab results were discussed by Geoff Langley of Petrochem and John Perry of the Illinois EPA Emergency Response Unit. From the data it was determined that the cutting oil contaminated soil around the tank was non hazardous (lab results attached).

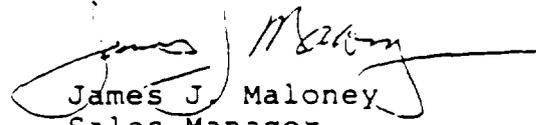
000143

Due to the characteristics of the clay around the tank the spill was confined to the backfill area. Petrochem excavated an extra two feet around the tank to ensure all contamination was removed. The soil was taken to the CID landfill. All of the free liquids taken from the hole and from the tank were taken to EWR in Coal City.

The hole was backfilled with pea gravel and the top resurfaced with concrete.

Should you need further explanation on any of the work performed, please contact me.

Sincerely,


James J. Maloney
Sales Manager

JJM/bjp

cc: Hank Mittlehauser

000144



GULF COAST LABORATORIES, INC.
2417 Bond St., University Park, Illinois 60466
Phones (312) 534-5200 (219) 885-7077 (815) 723-7511

ANALYTICAL REPORT

TO: Petrochem Services, Inc.
P.O. Box 337
Lemont, IL 60439

DATE: April 9, 1985

RE: PCPSI-53211-2 Soil RUSH
Sample Date: 04/02/85
GCL# 61560

ATTN: Mr. Geoff Langley

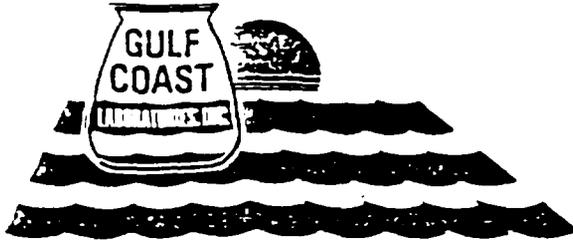
| PARAMETERS | RESULTS |
|-------------------------|------------|
| Total Solids | 90.4 mg/kg |
| Sulfides | < 5 mg/kg |
| Lead, E.P. Toxicity | < 0.5 mg/l |
| Selenium, E.P. Toxicity | < 0.1 mg/l |
| Arsenic, E.P. Toxicity | < 0.5 mg/l |

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Approved: John B. Brennan

Analyst _____

Date 04/09/85



GULF COAST LABORATORIES, INC.
2417 Bond St., University Park, Illinois 60466
Phones (312) 534-5200 (219) 885-7077 (815) 723-78

ANALYTICAL REPORT

TO: Petrochem Services, Inc.
P.O. Box 337
Lemont, Il 60439

DATE: April 9, 1985

RE: PCPSI-53211-2 Soil RUSH
Sample Date: 04/02/85
GCL# 61560

ATTN: Mr. Geoff Langley

| PARAMETERS | RESULTS |
|------------------------------|--------------|
| Arsenic | 13 mg/kg |
| Barium | 94 mg/kg |
| Cadmium | 2.3 mg/kg |
| Chromium | 3.6 mg/kg |
| Total Cyanides | < 5 mg/kg |
| Flash Point (Closed Cup) * | > 170 °F |
| Chlorinated Solvents | < 0.1 % |
| Benzene | < 0.1 % |
| Mineral Spirits | 2.0 % |
| Lead | 37 mg/kg |
| Mercury | < 0.05 mg/kg |
| Total PCB's | < 5 mg/kg |
| pH (10% Solution w/dipstick) | 6.5 |
| Phenols | 7 mg/kg |
| Selenium | 14 mg/kg |
| Silver | 1.1 mg/kg |

* Initial Flash will not support flame



217/782-6761

Refer to: 0430300003 -- DuPage County/FA 133
Downers Grove/Rexnord
ILD00545571

Certified # P 731 918 815

COMPLIANCE INQUIRY LETTER

April 12, 1985

Mr. Ralph O. Muehl
Rexnord, Inc.
350 N. Sunny Slope Road
Brookfield, Wisconsin 53005

Dear Mr. Muehl:

The purpose of this letter is to address the status of the above-referenced facility in relation to the requirements of Title 35, Subpart G and H and to inquire as to your position with respect to the apparent violations identified in Attachment A and your plans to correct these apparent violations. The Agency's findings of apparent non-compliance in Attachment A are based on a April 2, 1985 review of documents submitted to the Agency to demonstrate compliance with the requirements of Subpart G and H.

Please submit in writing, within fifteen (15) calendar days of the date of this letter, the reasons for the identified violations and a description of the steps which have been taken to correct the identified violations. The written response should be sent to the following:

Mark A. Haney, Manager
Facilities Compliance Unit
Compliance Monitoring Section
Illinois Environmental Protection Agency
Division of Land Pollution Control
2200 Churchill Road
Springfield, Illinois 62706

Further, take notice that non-compliance with the requirements of the Illinois Environmental Protection Act and rules and regulations adopted thereunder may be the subject of enforcement action pursuant to either the Illinois Environmental Protection Act, Ill. Rev. Stat., Ch. 111 1/2, Sec. 1001 et seq. or the federal Resource Conservation and Recovery Act (RCRA), 42 U.S.C. Sec. 6901 et seq.

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Page 2

If you have any questions regarding the above, please contact Andy Vollmer at 217/782-9884.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mark Haney".

Mark A. Haney, Manager
Facilities Compliance Unit
Compliance Monitoring Section
Division of Land Pollution Control

MAH:MT:jd/0739E/9

cc: Division File
Northern Region
Don Gimbel
Andy Vollmer
Gary King
Michelle Tebrugge

000148



Attachment A

1. You failed to respond to our inquiry of January 25, 1985.
2. Your closure plan fails to provide the closure performance standard as required by 725.211 (40 CFR 265.111). A description of how closure minimizes the need for post closure maintenance and minimizes the release of wastes must be provided.
3. Your closure cost estimate fails to provide the cost of certification as required by 725.215 (40 CFR 265.115). The owner or operator must submit to the Director certification both by the operator and by an independent registered professional engineer.
4. Your closure plan fails to provide the maximum inventory in storage or tank sizes as required by 725.212(a)(2) (40CFR265.112(a)(2)). An estimate of the maximum inventory of wastes in storage and in treatment at any time during the life of the facility must be provided.
5. Your closure plan fails to provide an estimated year of closure and a schedule for final closure.

MT:jd/0739E/11



TO: Company: Rexnord Corp
Fax No.: 914-649-1910
Attn: Aaron Hardt

FROM: Rudy Lys
Fax No.: 312-969-8827
Date: 11-17-89
Subject: NGSD - Response
No. of pages (incl. cover): 2

Mechanical Power Division
Roller Bearing Operation
2400 Curtiss Street
Caller No. 1482
Downers Grove, IL 60515
312/969-1770
TWX 910/695-3224

Claim -

A copy of the NSGD Response
to my letter is attached. I believe
this should close this incident
but I'm not real happy with
the last sentence which infers
we were out of compliance.

any comments?

Discussed with Rudy on

Regards,
Rudy
✓

BOARD OF TRUSTEES

Hugh A. Williams, Jr.
President
Herbert R. Reich
Vice-President
Donald E. Eckmann
Clerk



Downers
Grove
Sanitary
District

2710 Curtiss Street
P.O. Box 1412
Downers Grove, IL 60515-1412
1-312-969-0664

STAFF

Lawrence C. Cox
General Manager
Ralph E. Smith, Jr.
Operations Director
Shella K. Henschel
Administrative Services
Director

LEGAL COUNSEL

Michael C. Wleagl

Providing a Better Environment for South Central
DuPage County

November 16, 1989

Rudolph A. Fuys
Plant Metallurgist
Rexnord, Inc.
Mechanical Power Division
Roller Bearing Operation
2400 Curtiss Street
Downers Grove, IL 60515

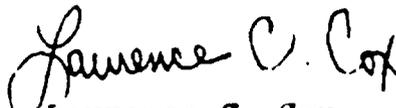
Re: Response to Notice of Violation

Dear Mr. Fuys:

Your response to the notice of violation issued by the District on October 16, 1989 has been reviewed and is complete. The measures you describe for preventing a recurrence of this type of problem appear to be adequate although you are still relying on an operator's judgement as to the depth of the sludge blanket.

I want to emphasize that the plating department staff handled the problem effectively and took the correct action in notifying the District, whether or not any of the concentrated wastewater was discharged. The actions required under the notice of violation are appropriate for this situation because there was an operational problem which needed to be corrected. Beyond preventive measures, it acknowledges the quick response of your people, which brought the effluent back into compliance, thus averting a serious violation.

Sincerely,
DOWNERS GROVE SANITARY DISTRICT


Lawrence C. Cox
General Manager

JML/jml

000151

VIA CERTIFIED MAIL - RETURN RECEIPT REQUESTED

October 30, 1989

Rexnord Corporation
2400 Curtiss Street
Downers Grove, IL 60515
312/969-1770
FAX: 312/969-8827

Lawrence C. Cox
General Manager
Downers Grove Sanitary District
2710 Curtiss Street
P.O. Box 1412
Downers Grove, IL 60515-1412

Dear Mr. Cox:

This is in response to your letter of October 24, 1989 requesting additional information regarding your notice of violation.

After closely reviewing the situation, I do not believe there was a violation of our Permit requirements.

Our standard operating procedure when releasing supernatant to the final pH sump is as follows.

Lower the release tube into the supernatant; the supernatant then flows through the tube and accumulates in the final pH tank sump until the sump pump turns on. (A float system activates the sump pump.) Supernatant is then pumped from the sump to the final pH tank. The final pH tank contents overflows a weir to the Sanitary District. The composite sample of the Plating Department effluent is taken from the overflow weir of the final pH tank.

The contamination of the final pH sump occurred because the treatment tank release tube was manually lowered too far into the batch treatment tank such that the end of the tube was not visible because of cloudy solution. This resulted in some sludge as well as supernatant being released to the final pH sump and then to the final pH tank. Department personnel normally present in the area noticed discoloration in the final pH tank and shut down the system. Analysis of a grab sample taken from the final pH tank immediately after shutdown indicated: total Copper 154 ppm, total Chromium 495 ppm, and total Cadmium 6.4 ppm. No other information on the concentration of the discharge from the final pH adjust tank was taken or is available. The composite sample, however, indicated total Copper 0.08 ppm, total Chromium 0.11 ppm, and total Cadmium 0.04 ppm.

Although the grab sample results from the final pH tank are high, the composite sample results are well within our Permit limits. These data indicate that close to 100% of the sludge was contained in our treatment system. The inadvertent release to the final pH tank sump had a nil effect on the Plating Department daily effluent.

000152

October 30, 1989
Lawrence C. Cox, General Manager
Downers Grove Sanitary District
Page 2

Containment of the sludge in the system was due to the fast response of our Plating personnel. As described previously, the contaminated solutions were dumped to holding tanks and the systems thoroughly cleaned up prior to resuming operations.

To prevent this type of event in the future, the following corrective actions have been taken:

1. All Plating and Lab personnel involved with the supernatant release operations were re-instructed by the Plating Department Supervisor and Plant Metallurgist that the end of the release tube must be clearly visible prior to initiating a treatment supernatant release to the final pH tank.
2. The sampling procedure has been changed such that before releasing ANY batch treatment to the final pH tank, Lab personnel rather than Plating personnel will obtain a sample using a Sludge Judge or similar tube type sampling device. This will provide a tighter inspection of the supernatant prior to the Lab decision to release the treatment batch to the final pH tank.
3. Platers were re-instructed to monitor appearance of the final pH tank during a dump.

Sincerely,

Rudolph A. Fuys, Jr.
Plant Metallurgist

f

cc Lee Ruesch
George Beyer
Manny Barcia
Bob Hughes
Jim Iglesias
Aaron Hardt

(#36/014)

000153



Seatings

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

October 12, 1989

Mr. Lawrence C. Cox
General Manager
Downers Grove Sanitary District
2710 Curtiss Street
P.O. Box 1412
Downers Grove, IL 60515-1412

Rexnord Corporation
2400 Curtiss Street
Downers Grove, IL 60515
312/969-1770
FAX 312/969-8827

Dear Mr. Cox:

On October 6, 1989 we had an upset in our waste water treatment section of our Plating Department. Sludge was accidentally picked up from the batch acid treatment tank while dumping supernatant to the final P^H tank. The 15-20 minute occurrence resulted in approximately 165 - 215 gallons of waste water being discharged from the Plating Department prior to the system being shut down.

The daily composite sample results shown below are well within our daily discharge limitations:

| | |
|----------------|----------|
| Total Copper | 0.08 ppm |
| Total Chromium | 0.11 ppm |
| Total Cadmium | 0.04 ppm |

The contaminated solutions were dumped to holding tanks and the systems thoroughly cleaned up prior to resuming operations.

To prevent this type of event in the future, the following corrective actions have been taken:

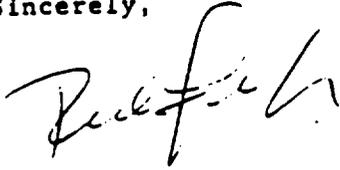
1. All Plating and Lab personnel involved with the supernatant release operations were re-instructed by the Plating Department Supervisor and Plant Metallurgist that the end of the release tube must be clearly visible prior to initiating a treatment supernatant release to the final P^H tank.
2. The sampling procedure has been changed such that before releasing ANY batch treatment to the final P^H tank, Lab personnel rather than Plating personnel will obtain a sample using a Sludge Judge or similar tube type sampling device. This will provide a tighter inspection of the supernatant prior to the Lab decision to release the treatment batch to the final P^H tank.

000154

October 12, 1989
Mr. Lawrence C. Cox, General Manager
Downers Grove Sanitary District
Page 2

3. Platers were re-instructed to monitor appearance of the final pH tank during a dump.

Sincerely,



Rudolph A. Fuys
Plant Metallurgist

f

cc L. Ruesch
G. Beyer
M. Barcia
R. Hughes
J. Iglesias
A. Hardt

000155

SOIL EXCAVATION SUMMARY REPORT

Prepared for:

**Rexnord Corporation
2400 Curtiss Street
Downers Grove, Illinois**

Prepared by:

**Mittelhauser Corporation
1240 Iroquois Drive
Naperville, Illinois 60563**

Project 2125.01-01

January 1993

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Rexnord Corporation
Soil Excavation Summary Report

January 1993

2125RC01 DJL

1.0 INTRODUCTION

This report documents the removal, treatment, and disposal of impacted soil at the Rexnord Corporation (Rexnord) facility in Downers Grove, Illinois (see Figure 1). Remedial activities were conducted to remove soil impacted with elevated concentrations of cadmium in the vicinity of a former aboveground Carbonate Process Tank (CPT).

1.1 PURPOSE

The purpose of this report is to provide documentation of the removal activities, and offsite treatment and disposal, of cadmium-impacted soil at the site. The impacted soil was removed in order to reduce any future liability associated with storm water run off, property transfers, or environmental audits. Documentation provided in this report includes a summary of the soil removal activities, photographs of the removal activities, manifests, and Non-Hazardous Certification Certificates for the treated soil.

1.2 PREVIOUS WORK

Rexnord retained Scientific Control Laboratories (SCL) to collect and analyze soil samples in preparation for the removal of the CPT and concrete pad. Figure 2 shows the location of the former CPT and surrounding site features.

A total of eleven soil samples were collected by SCL on September 3 and 11, 1992. The soil samples were collected at the surface and at depths of 1 foot below and 2 feet below the ground surface along each side of the concrete pad. The samples were analyzed for cadmium by SCL.

Rexnord Corporation
Soil Excavation Summary Report

January 1993
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The analytical results indicated that elevated concentrations of cadmium were present in soil surrounding the CPT. Cadmium concentrations ranged from 11.8 to 388 mg/kg.

Rexnord retained Mittelhauser Corporation (Mittelhauser) to further delineate the extent of total cadmium and extent of total cyanide in the soil. Mittelhauser collected a total of 28 soil samples at 17 locations on September 17, 1992. Soil sample locations are shown in Figure 3. The soil samples were collected at the surface and at varying depths of 1.5 to 2.5, 2.5 to 3.5, and 3.5 to 4.5 feet below the ground surface. The soil samples were submitted to SCL for analysis of total cadmium. Eight of the soil samples were analyzed for total cyanide.

The soil analytical results indicated that concentrations of total cadmium ranged from less than 0.5 mg/kg to 174 mg/kg. Total cyanide concentrations in the soil ranged from less than 2.5 mg/kg to 17.5 mg/kg. The analytical results are summarized in Table 1.

A total of 6 soil samples exhibiting a given range of total cadmium concentrations were selected for analysis by the Toxicity Characteristic Leaching Procedure (TCLP) for cadmium. The TCLP analytical results (see Table 1) indicated that samples SS-2A and SS-6A contained cadmium concentrations of 3.1 and 0.85 mg/l, respectively. These samples exhibited total cadmium concentrations of 174 and 108 mg/kg, respectively. TCLP concentrations of cadmium exceeding 1.0 mg/l exhibit the characteristic of toxicity and are considered a hazardous waste.

Based on the comparison of total cadmium versus TCLP cadmium, it was decided that soils exhibiting a total cadmium concentration below 100 mg/kg would most likely not

Rexnord Corporation
Soil Excavation Summary Report

January 1993

2125RCD1 DJL

exceed the TCLP cadmium limit for a characteristic hazardous waste. Based on this comparison, removal of soils to a depth of 3 feet in an area surrounding the concrete pad was proposed. This proposed excavation depth encompassed the total cadmium concentrations that may have exceeded the TCLP limit for a characteristic hazardous waste containing cadmium. In addition, removal of an area of soil approximately 5 feet wide by 20 feet long to a depth of 6 to 8 inches, located south of the concrete pad, was proposed. This area contained total cadmium concentrations ranging from less than 0.5 mg/kg (SS-14) to 8.8 mg/kg (SS-7S). The proposed areas of soil excavation are shown in Figure 4.

On October 19, 1992, Rexnord personnel power washed the concrete pad and collected a rinsate sample for chemical analysis. The rinsate sample was submitted to SCL for analysis of cadmium and total cyanide. The analytical results indicated the presence of 0.12 mg/l cadmium and 0.15 mg/l total cyanide.

Rexnord Corporation
Soil Excavation Summary Report

January 1993
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2.0 SOIL REMOVAL ACTIVITIES

Soil removal activities at the Rexnord facility were conducted during the time period of December 3 through 8, 1992. The activities included the removal of a tree stump and several bushes surrounding the concrete pad, demolition of the concrete pad, excavation of impacted soil, offsite treatment and disposal of impacted soil, and backfilling of the excavated areas with clean fill and topsoil.

Rexnord retained Mittelhauser to conduct oversight of the removal activities and prepare this report. Mittelhauser subcontracted American Waste in Maywood, Illinois to remove a tree stump and several bushes surrounding the concrete pad, demolish the concrete pad, excavate the impacted soil, load the excavated soil in the trucks, backfill the excavation, and cover the backfilled areas with topsoil. Envirite Corporation in Harvey, Illinois was contracted by Rexnord to transport the impacted soil to their facility for treatment. Envirite disposed of all of the soil at their landfill in Pontiac, Illinois after it was treated and rendered non-hazardous.

The removal activities for each day of operation are summarized below. A photographic log of the soil removal activities is provided in Appendix A.

December 3, 1992

American Waste mobilized their equipment to the site. Rexnord removed several sections of fencing to facilitate equipment entry to the job site. The sloped surface in the vicinity of the former CPT caused difficulty for the rubber tire backhoe to maneuver. Subsequently, a small bobcat was mobilized to the site to load the excavated soil in the truck hauler. A stump from a tree located adjacent to the

Rexnord Corporation
Soil Excavation Summary Report

January 1993
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concrete pad, previously cut down by Rexnord, was removed. Several bushes in front and to the south of the CPT were also removed.

Approximately 40 cubic yards of impacted soil were excavated during the first day. The 40 cubic yards of soil were loaded in two truck haulers and transported offsite as hazardous waste by Envirite to their treatment facility in Harvey, Illinois. All soil transported offsite was properly manifested (Manifest Numbers 3818889 and 3818891). Rexnord signed a manifest and Land Disposal Notification/Certification Form for each load of soil hauled offsite. Copies of the manifests and Land Disposal Notification/Certification Forms are provided in Appendix B.

December 4, 1992

Approximately 20 more cubic yards of soil and slough were excavated to attain the 3 foot minimum depth of excavation. The 20 cubic yards of soil were loaded in the truck hauler and transported offsite to the Envirite facility. The soils were transported under manifest number 3818892.

American Waste began to demolish the concrete pad using a hydraulic concrete hammer attached to the bobcat. The hydraulic concrete hammer on the rubber tire backhoe was not used initially because of a concern of causing structural damage to the brick wall and foundation of the adjacent building.

The concrete pad was approximately 8 inches thick and hollow. The pad was filled with clayey soil presumably obtained during construction of the building. This soil fill was stockpiled with the broken pieces of concrete and bushes to be disposed of offsite as non-hazardous construction debris. American Waste mobilized a compressor and two jackhammers to help facilitate the demolition of the concrete

Rexnord Corporation
Soil Excavation Summary Report

January 1993
2125AC01 DJL

pad. Progress was hampered by the strength of the concrete, the presence of rebar, and access problems for the heavier equipment.

American Waste delivered clean backfill material to the site. The backfill consisted of clayey soil. The concrete pad was less than half demolished by the end of the day.

December 7, 1992

In an effort to speed up demolition, American Waste attached the large hydraulic concrete hammer to the backhoe and began demolishing the remaining concrete pad. No structural damage to the adjacent building was encountered. The remaining areas of concrete pad not accessible by the larger equipment was finally demolished with the use of jackhammers. Demolition of the concrete pad was completed by the end of the day. The concrete pad was lowered approximately 1 foot below grade along the building wall and the remaining walls of the pad were lowered 2.5 feet below grade.

American Waste loaded all broken concrete, clayey slough, the tree stump, and bushes into a 20-yard rolloff box for offsite disposal as non-hazardous construction debris. The third and final load of backfill was delivered to the site. Approximately 15 cubic yards of ground topsoil was also delivered to the site.

The former drain pipe leading from the pad through the wall into the plant was cut flush to the building wall and sealed with hydraulic cement. American Waste backfilled the shallow excavation area south of the former CPT.

Rexnord Corporation
Soil Excavation Summary Report

January 1993

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December 8, 1992

Mittelhauser measured the perimeter and depth of the completed excavation. The final extent of the excavated area is shown in Figure 5. American Waste backfilled the main excavation with clayey fill. Each lift of backfill material placed into the excavation was compacted with the bucket of the backhoe. The excavation was filled to bring the top of the compacted backfill to the original surface grade.

American Waste then covered the excavated and damaged grassy areas with a final layer of topsoil.

Rexnord Corporation
Soil Excavation Summary Report

January 1993

2125RC01 DJL

3.0 OFFSITE TREATMENT AND DISPOSAL

Approximately 60 cubic yards (40.3 tons) of cadmium-impacted soil was transported offsite and treated as hazardous waste by Envirite. The impacted soil was stabilized and rendered non-hazardous through their treatment process on December 3 and 4, 1992. The treated soil was disposed at their landfill facility in Pontiac, Illinois on December 8, 1992. The Non-Hazardous Certification Certificates for the three loads of treated soil are provided in Appendix C.

Rexnord Corporation
Soil Excavation Summary Report

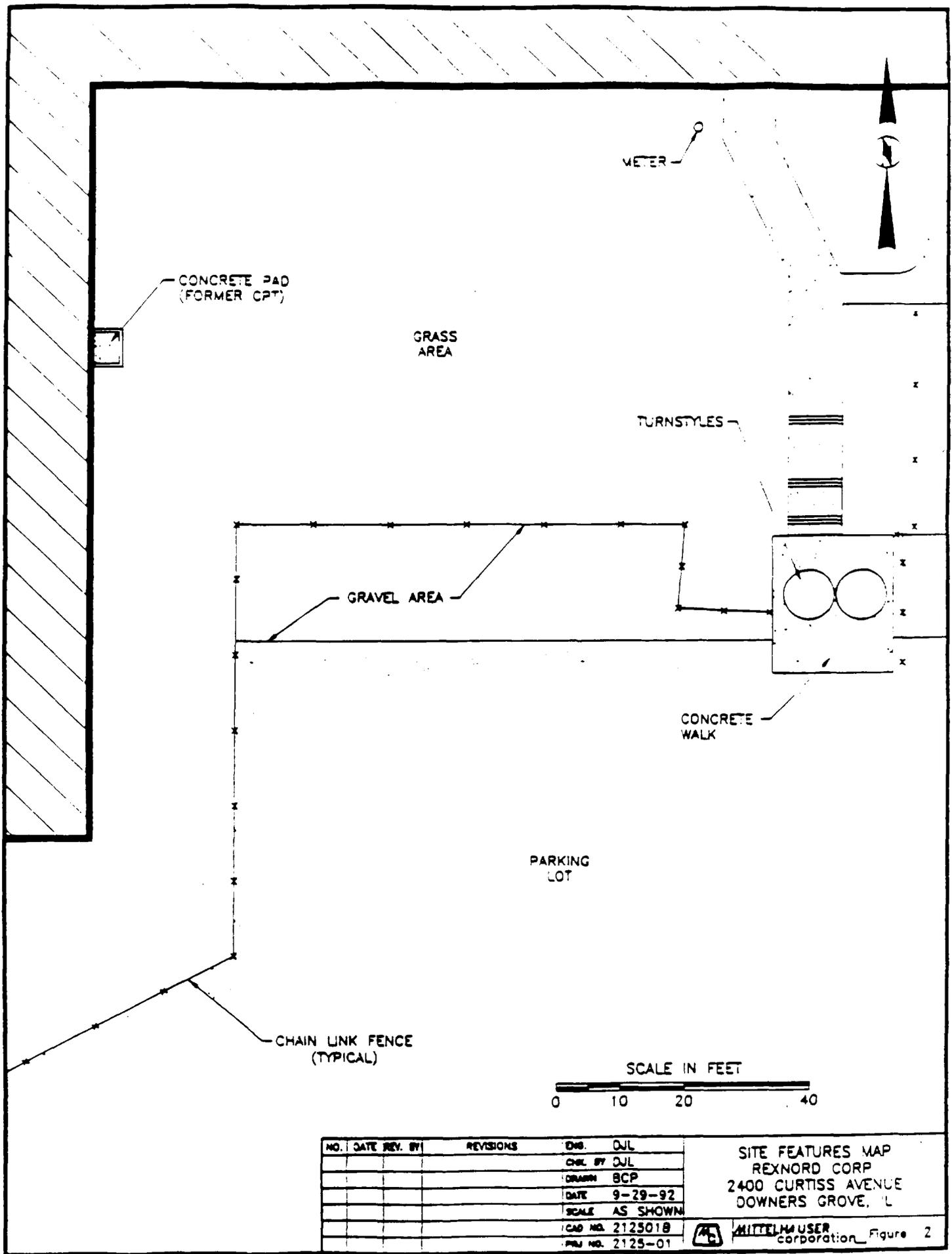
January 1993
2125AC01 DJL

4.0 DISCLAIMER

This report was prepared solely for the use of Rexnord Corporation. The content provided by Mittelhauser in this report summary is based on information collected during our oversight of soil removal activities, which may include, but is not limited to, previous investigations, visual site inspections, interviews with site owner, subsurface exploration and laboratory testing of soil samples, and our professional judgment based on said information at time of preparation of this document. Any subsurface sample results and observations presented herein are considered to be representative of the area of investigation; however, geological conditions may vary between borings and may not necessarily apply to the general site as a whole. If future subsurface or other conditions are revealed which vary from these findings, the newly-revealed conditions must be evaluated and may invalidate the conclusions of this report.

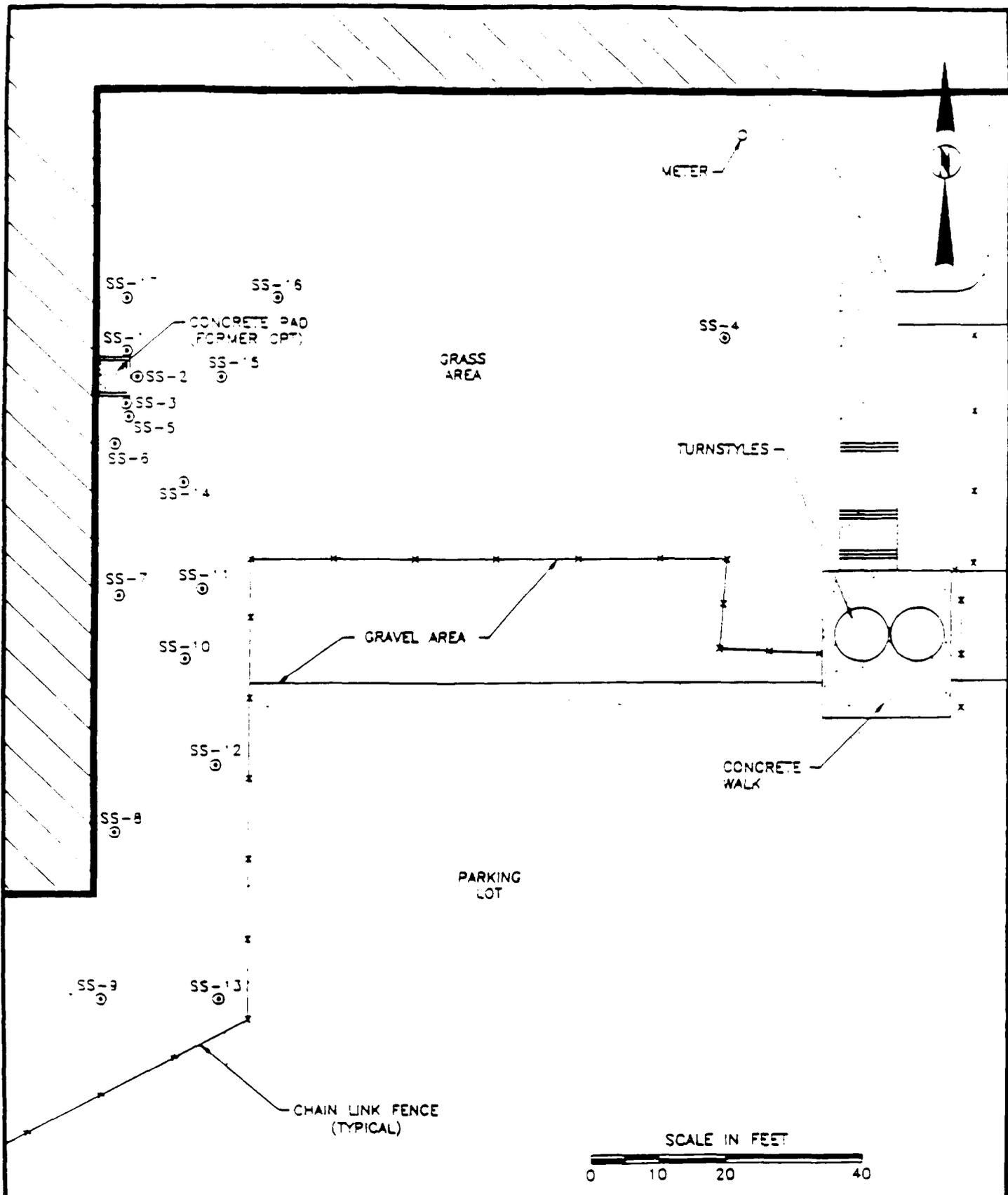
This report is issued with the understanding that it is the responsibility of the owner, or his representative, to ensure that the information contained herein is brought to the attention of the appropriate regulatory agencies, where required by law.

This report has been prepared in accordance with generally accepted practices using standards of care and diligence normally practiced by recognized consulting firms performing services of a similar nature. Mittelhauser is not responsible for the accuracy of information which is provided by other individuals or entities and used in this report.



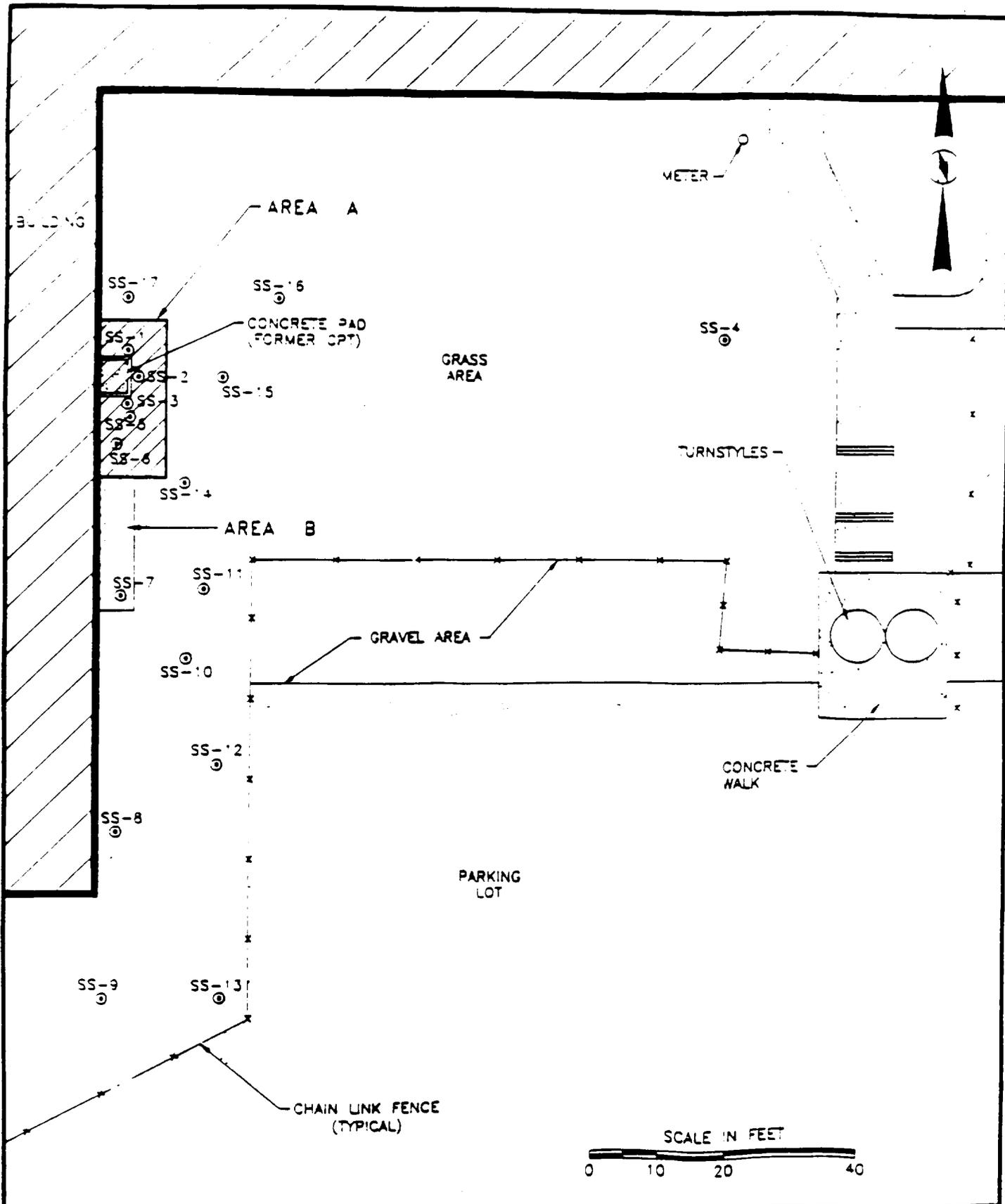
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| | | | | DRAWN | BCP |
| | | | | DATE | 9-29-92 |
| | | | | SCALE | AS SHOWN |
| | | | | CAD NO. | 212501B |
| | | | | PLG NO. | 2125-01 |

SITE FEATURES MAP
 REXNORD CORP
 2400 CURTISS AVENUE
 DOWNERS GROVE, IL
 MITTELHAUSER Corporation Figure 2

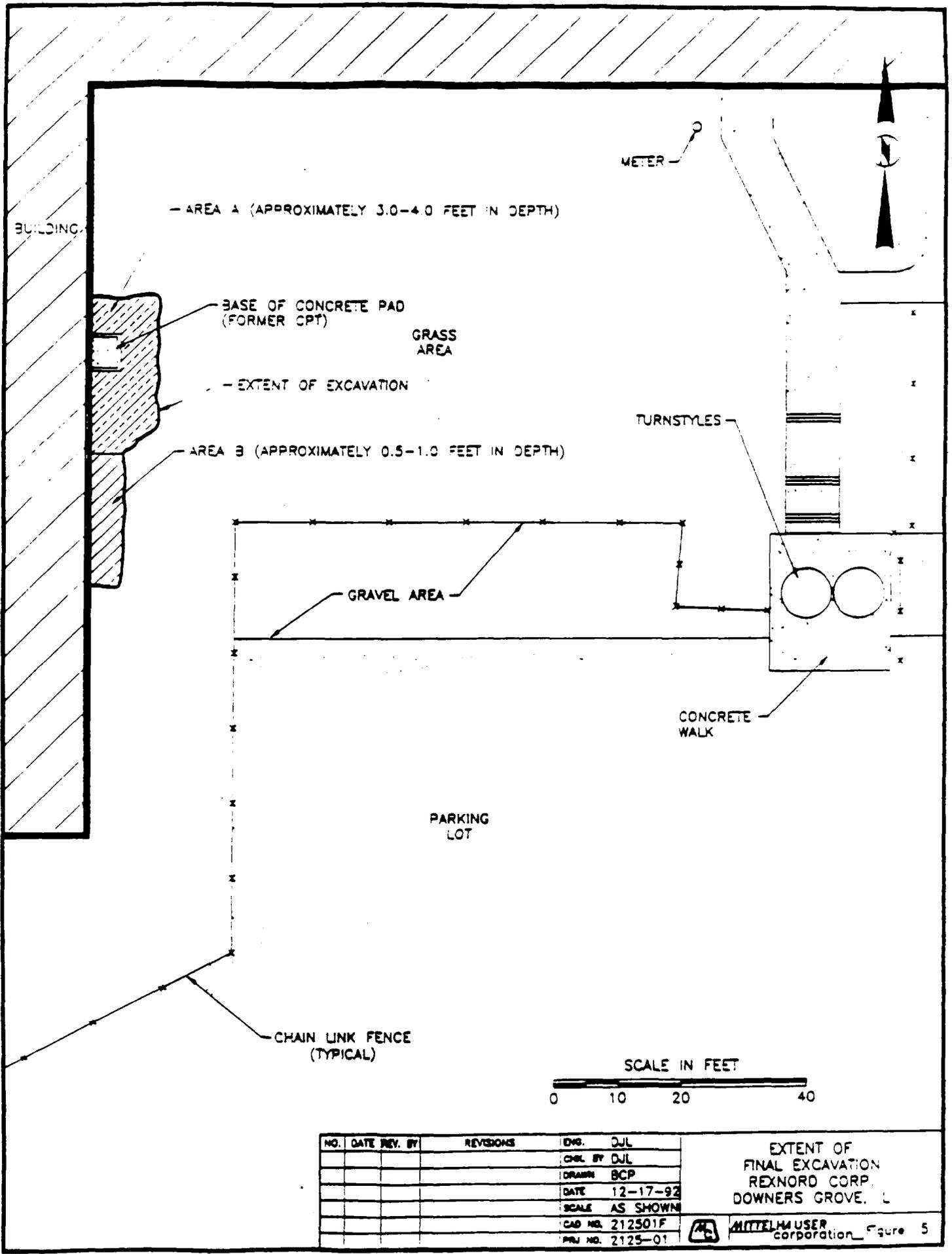


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| | | | | ORIGIN | BCP |
| | | | | DATE | 9-29-92 |
| | | | | SCALE | AS SHOWN |
| | | | | CAD NO. | 212501C |
| | | | | PRJ. NO. | 2125-01 |

| | |
|---|--|
| LEGEND ⊙ SOIL SAMPLE LOCATION | SAMPLE LOCATION MAP REXNORD CORP. 2400 CURTISS AVENUE DOWNERS GROVE, IL |
| | MITTELHAUSER Corporation Figure 3 |



| LEGEND | | NO. DATE REV. BY REVISIONS | | ENG. DJL | PROPOSED AREAS OF EXCAVATION REXNORD CORP OWNERS GROVE, IL MITTELHAUSER Corporation Figure 4 |
|--------|----------------------|--------------------------------|--|-----------------|--|
| ⊙ | SOIL SAMPLE LOCATION | | | CHK. BY DJL | |
| | | | | DRAWN BCP | |
| | | | | DATE 12-17-92 | |
| | | | | SCALE AS SHOWN | |
| | | | | CAD NO. 212501E | |
| | | | | PLN NO. 2125-01 | |



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| | | | | CHEK BY | DJL |
| | | | | DRWNR | BCP |
| | | | | DATE | 12-17-92 |
| | | | | SCALE | AS SHOWN |
| | | | | CAD NO. | 212501F |
| | | | | PRJ NO. | 2125-01 |

EXTENT OF
 FINAL EXCAVATION
 REXNORD CORP.
 DOWNERS GROVE, IL

MITTELBAUER Corporation Figure 5

TABLE 1
SOIL ANALYTICAL RESULTS

Page 1 of 2

| SAMPLE NUMBER | SAMPLE DEPTH (feet) | TOTAL CADMIUM (mg/kg) | TCLP CADMIUM (mg/l) | TOTAL CYANIDE (mg/kg) |
|---------------|---------------------|-----------------------|---------------------|-----------------------|
| SS-1A | 1.5 - 2.5 | 24.6 | NA | 17.5 |
| SS-1B | 2.5 - 3.5 | 2.6 | NA | NA |
| SS-1C | 3.5 - 4.5 | 1.6 | NA | < 2.50 |
| SS-2A | 1.5 - 2.5 | 174.0 | 3.10 | 11.3 |
| SS-2B | 2.5 - 3.5 | 45.6 | NA | NA |
| SS-2C | 3.5 - 4.5 | 34.7 | < 0.50 | 5.15 |
| SS-3A | 1.5 - 2.5 | 32.6 | NA | 2.80 |
| SS-3B | 2.5 - 3.5 | 6.4 | NA | NA |
| SS-3C | 3.5 - 4.5 | 16.3 | NA | 3.60 |
| SS-4S | SURFACE | < 0.5 | NA | NA |
| SS-5A | 2.5 - 3.5 | 22.3 | < 0.50 | NA |
| SS-5B | 3.5 - 4.5 | 2.5 | NA | NA |
| SS-6A | 1.5 - 2.5 | 108.0 | 0.85 | NA |
| SS-6B | 2.5 - 3.5 | 37.4 | NA | NA |
| SS-7S | SURFACE | 8.8 | < 0.50 | NA |
| SS-7A | 1.0 | 1.8 | NA | NA |
| SS-8S | SURFACE | < 0.5 | NA | 2.3 |
| SS-8A | 1.0 | < 0.5 | NA | 1.8 |
| SS-9S | SURFACE | 1.0 | NA | NA |
| SS-9A | 1.0 | < 0.5 | NA | NA |
| SS-10S | SURFACE | 1.0 | NA | NA |
| SS-11S | SURFACE | < 0.5 | NA | NA |
| SS-12S | SURFACE | < 0.5 | NA | NA |

TABLE 1
SOIL ANALYTICAL RESULTS

Page 1 of 2

| SAMPLE NUMBER | SAMPLE DEPTH (feet) | TOTAL CADMIUM (mg/kg) | TCLP CADMIUM (mg/l) | TOTAL CYANIDE (mg/kg) |
|---------------|---------------------|-----------------------|---------------------|-----------------------|
| SS-1A | 1.5 - 2.5 | 24.6 | NA | 17.5 |
| SS-1B | 2.5 - 3.5 | 2.6 | NA | NA |
| SS-1C | 3.5 - 4.5 | 1.6 | NA | < 2.50 |
| SS-2A | 1.5 - 2.5 | 174.0 | 3.10 | 11.3 |
| SS-2B | 2.5 - 3.5 | 45.6 | NA | NA |
| SS-2C | 3.5 - 4.5 | 34.7 | < 0.50 | 5.15 |
| SS-3A | 1.5 - 2.5 | 32.6 | NA | 2.80 |
| SS-3B | 2.5 - 3.5 | 6.4 | NA | NA |
| SS-3C | 3.5 - 4.5 | 16.3 | NA | 3.60 |
| SS-4S | SURFACE | < 0.5 | NA | NA |
| SS-5A | 2.5 - 3.5 | 22.3 | < 0.50 | NA |
| SS-5B | 3.5 - 4.5 | 2.5 | NA | NA |
| SS-6A | 1.5 - 2.5 | 108.0 | 0.85 | NA |
| SS-6B | 2.5 - 3.5 | 37.4 | NA | NA |
| SS-7S | SURFACE | 8.8 | < 0.50 | NA |
| SS-7A | 1.0 | 1.8 | NA | NA |
| SS-8S | SURFACE | < 0.5 | NA | 2.3 |
| SS-8A | 1.0 | < 0.5 | NA | 1.8 |
| SS-9S | SURFACE | 1.0 | NA | NA |
| SS-9A | 1.0 | < 0.5 | NA | NA |
| SS-10S | SURFACE | 1.0 | NA | NA |
| SS-11S | SURFACE | < 0.5 | NA | NA |
| SS-12S | SURFACE | < 0.5 | NA | NA |

TABLE 1
SOIL ANALYTICAL RESULTS

Page 2 of 2

| SAMPLE NUMBER | SAMPLE DEPTH (feet) | TOTAL CADMIUM (mg/kg) | TCLP CADMIUM (mg/l) | TOTAL CYANIDE (mg/kg) |
|---------------|---------------------|-----------------------|---------------------|-----------------------|
| SS-13S | SURFACE | < 0.5 | NA | NA |
| SS-14S | SURFACE | < 0.5 | NA | NA |
| SS-15S | SURFACE | 0.5 | NA | NA |
| SS-16S | SURFACE | < 0.5 | NA | NA |
| SS-17S | SURFACE | 2.2 | NA | NA |
| RS-1S | SURFACE | 388.0 | NA | NA |
| RS-1A | 1.0 | 212.0 | NA | NA |
| RS-1B | 2.0 | 330.0 | NA | NA |
| RS-2S | SURFACE | 216.0 | NA | NA |
| RS-3S | SURFACE | 157.0 | NA | NA |
| RS-4S | SURFACE | 260.0 | NA | NA |
| RS-4A | 1.0 | 11.8 | NA | NA |
| RS-4B | 2.0 | 115.0 | NA | NA |
| RS-5S | SURFACE | 352.0 | NA | NA |
| RS-5A | 1.0 | 75.4 | NA | NA |
| RS-5B | 2.0 | 115.0 | NA | NA |

Notes: NA = Not analyzed.

RS = Rexnord soil samples. Samples are located adjacent to the following Mittelhauser sample locations (see Figure 1-2):

- RS-1 (SS-3)
- RS-2 (SS-5)
- RS-3 (SS-6)
- RS-4 (SS-2)
- RS-5 (SS-1)

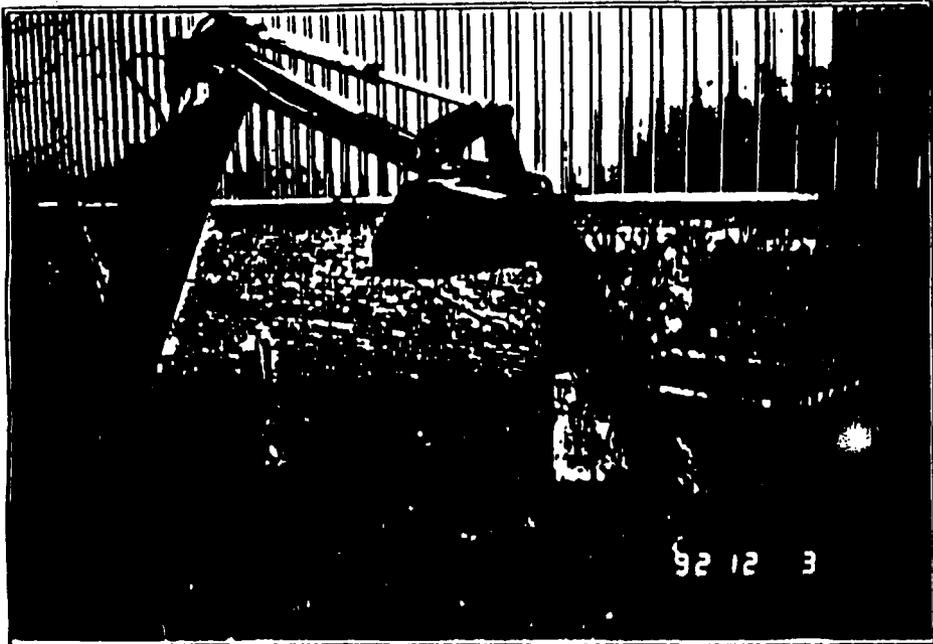
Rexnord Corporation
Soil Excavation Summary Report

January 1993
2125RC01 DUL

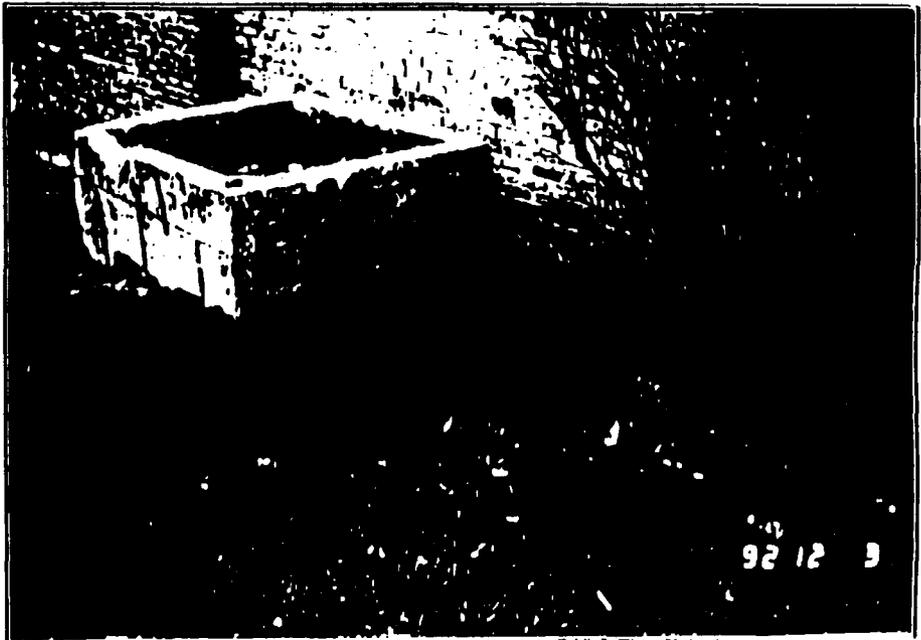
APPENDIX A

Photo Log

PHOTO LOG
 Rexnord Corp.
 Soil Excavation Summary
 Downers Grove, Illinois
 Project 2125.01



PHOTOGRAPH #3 *by DJL: 12/03/92*
 Southwest: Operator removing bushes. Note: aluminum cover was removed earlier in the day. Tree stump located to the left of the concrete pad.



PHOTOGRAPH #4 *by DJL: 12/03/92*
 Southwest: View of concrete pad from the north side of the excavation.

000476

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2126.01



PHOTOGRAPH #5 *by DJL: 12/03/92*
Southwest: Soil being excavated to the south of the concrete pad. Tree stump removed from left corner of excavation (note tree roots).



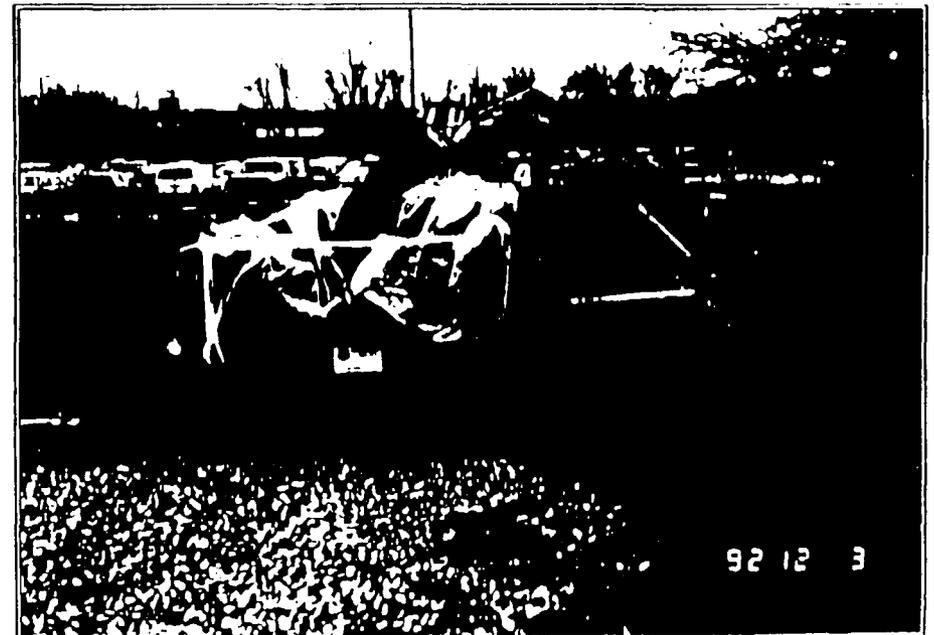
PHOTOGRAPH #6 *by DJL: 12/03/92*
North: Shallow excavation area south of concrete pad. Shallow excavation is 0.5 feet deep in the foreground and 1.0 feet deep approximately 20 feet to the north.

000177

PHOTO LOG
Rexnord Corp
Soil Excavation Summary
Downers Grove, Illinois
Project 2125.01



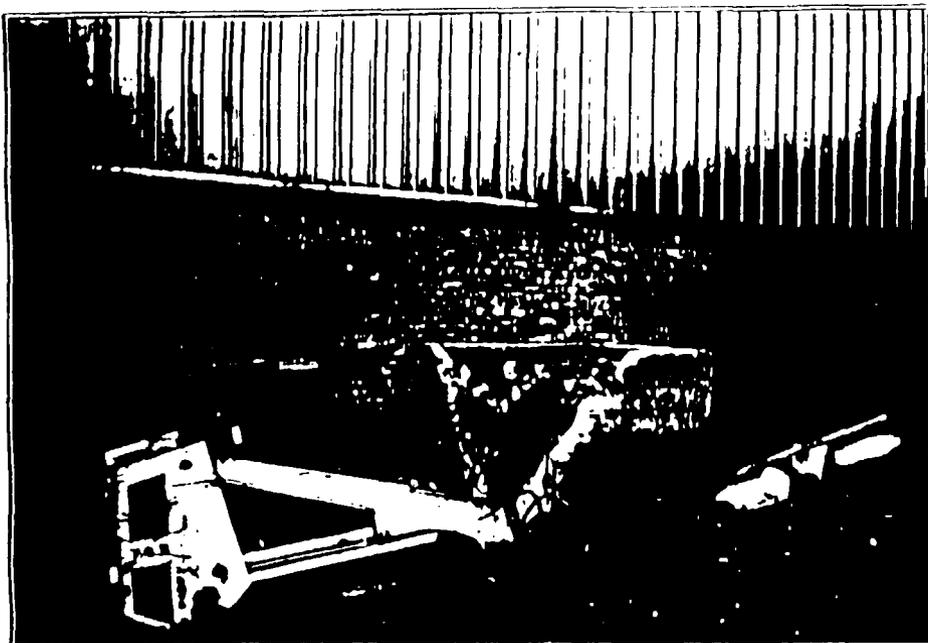
PHOTOGRAPH #7 *by D.J. 12/03/92*
North-northwest: Opening in the fence to facilitate equipment access.



PHOTOGRAPH #8 *by D.J. 12/03/92*
South: Bobcat loading soil into the waste hauler container.

000178

PHOTO LOG
Rexnord Corp
Soil Excavation Summary
Downers Grove, Illinois
Project 2125 01



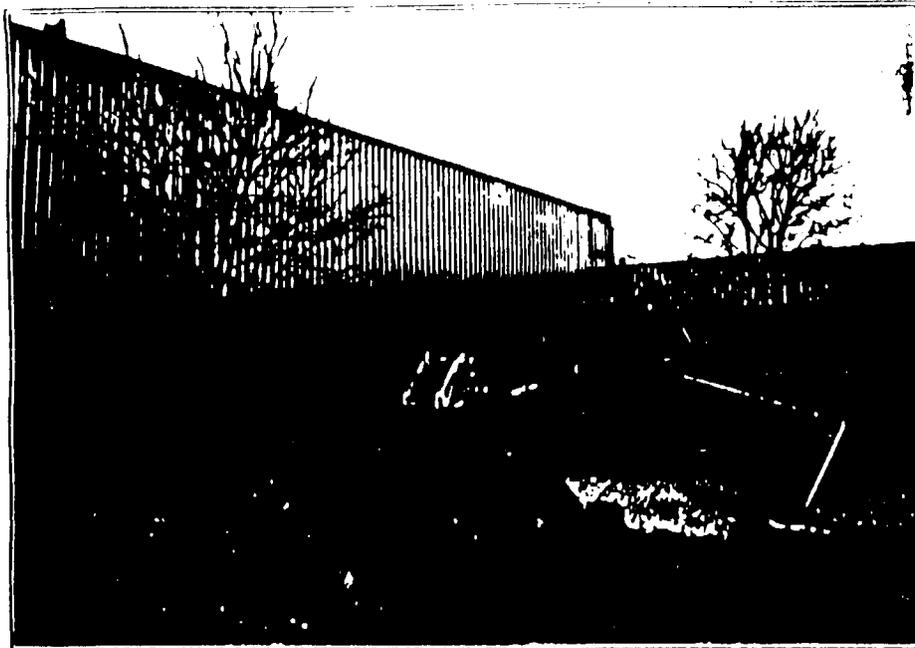
PHOTOGRAPH #9 *by DJL 12/04/92*
Demolition of concrete pad with hydraulic concrete hammer attached to Bobcat. Note: concrete pad is hollow and contains clayey fill material.



PHOTOGRAPH #10 *by DJL 12/04/92*

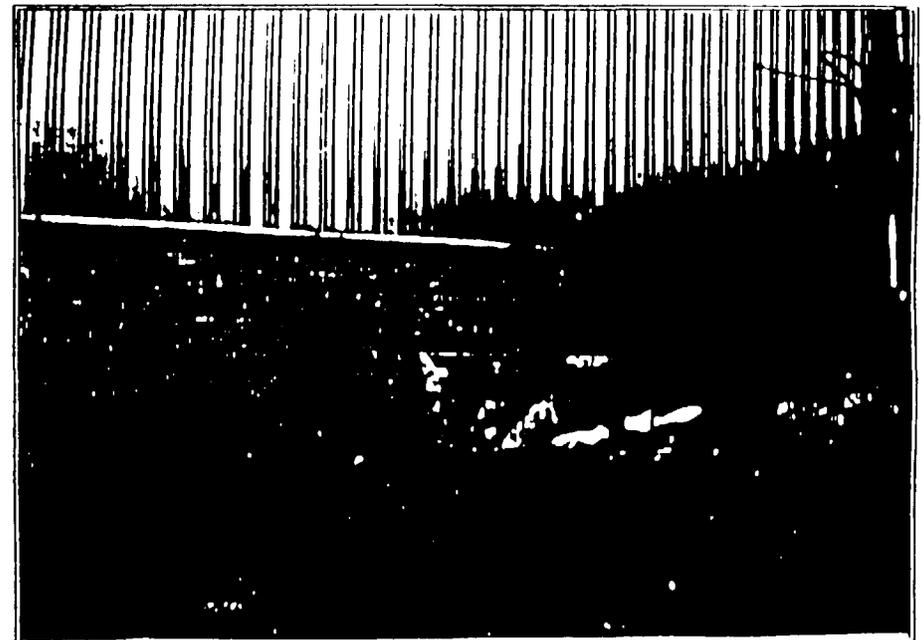
000179

PHOTO LOG
Rexnord Corp
Soil Excavation Summary
Downers Grove, Illinois
Project 2125 01



PHOTOGRAPH #11
Northwest: First load of backfill.

by DJI 12/04/92

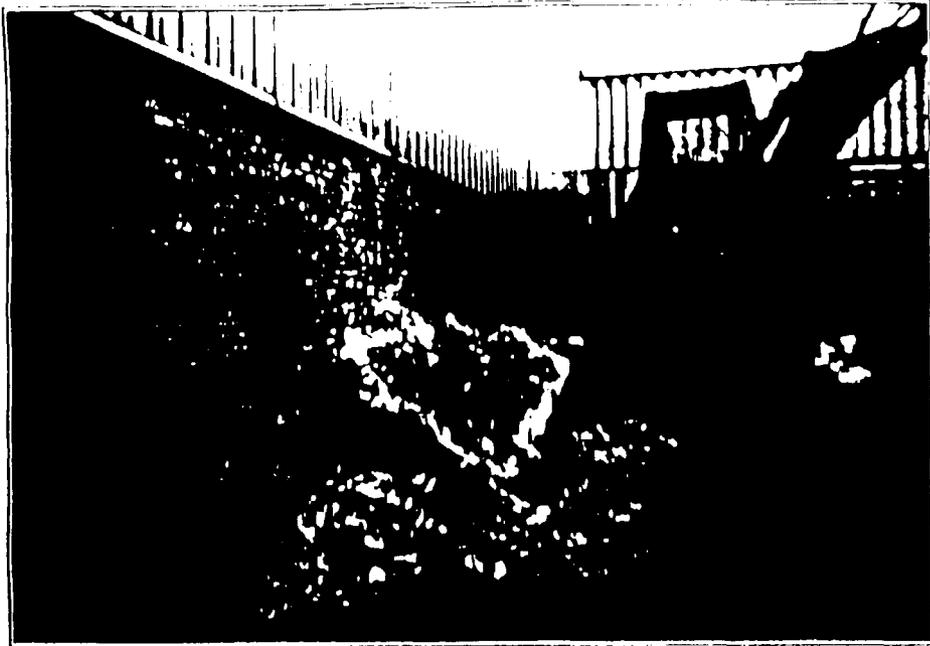


PHOTOGRAPH #12
West: Demolition of concrete pad with jackhammers.

by DJI 12/04/92

000180

PHOTO LOG
Rexnord Corp
Soil Excavation Summary
Downers Grove, Illinois
Project 2126 01



PHOTOGRAPH #13

by DJL 12/04/92

North: Concrete pad after first day of demolition.

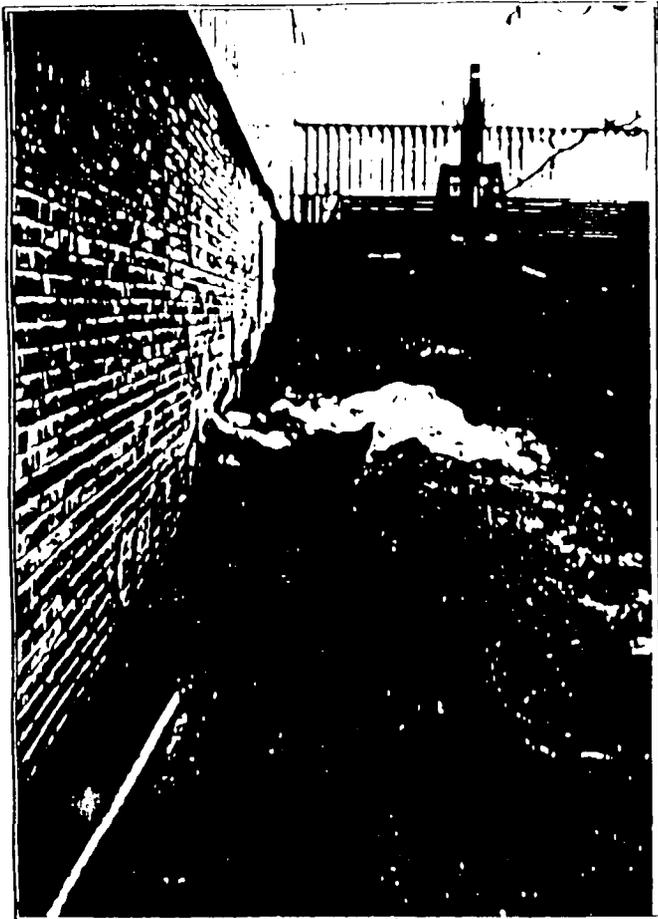


PHOTOGRAPH #14

by DJL 12/07/92

North: Demolition of concrete pad with large hydraulic hammer

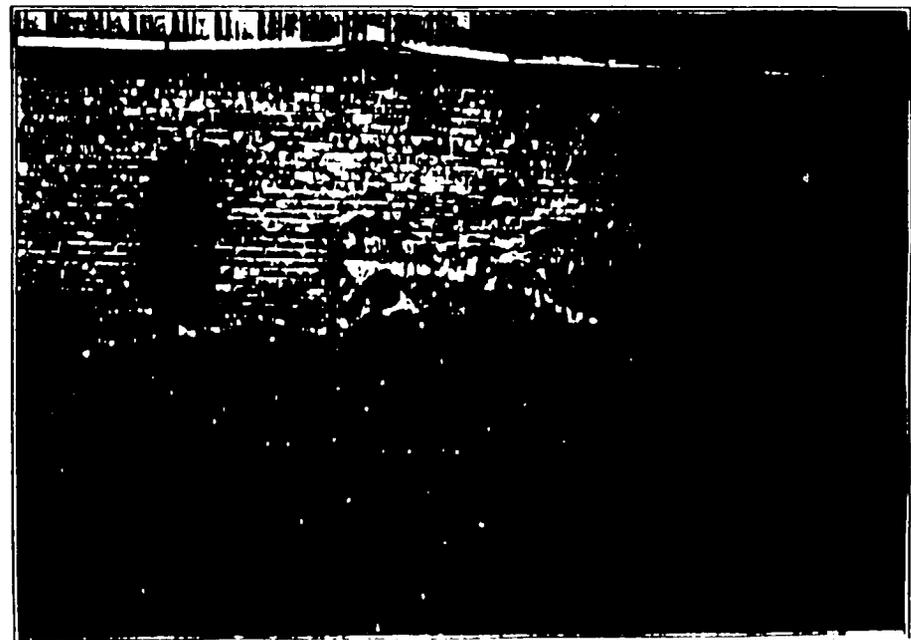
by DJL 12/07/92



PHOTOGRAPH #15 *by DJL 12/08/92*
North: Excavation backfilled to original grade.
Note: plastic sheeting in the center of the
photograph was removed prior to grading the
topsoil.

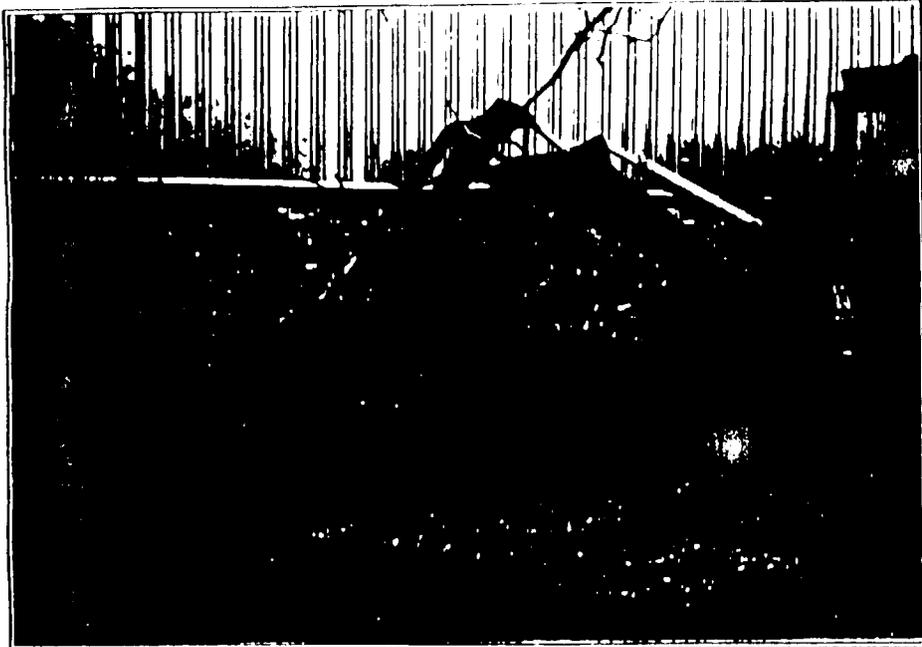
000182

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2125.01



PHOTOGRAPH #16 *by DJL 12/08/92*
West: Backfilled excavation with location of former CPI and
concrete pad. Note: pipe cut flush to wall and sealed with

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2125.01



PHOTOGRAPH #17
West: Operator compacting backfill.

by DJL 12/08/92



PHOTOGRAPH #18

Grounds - 5 feet below ground level excavated area

by DJL 12/08/92

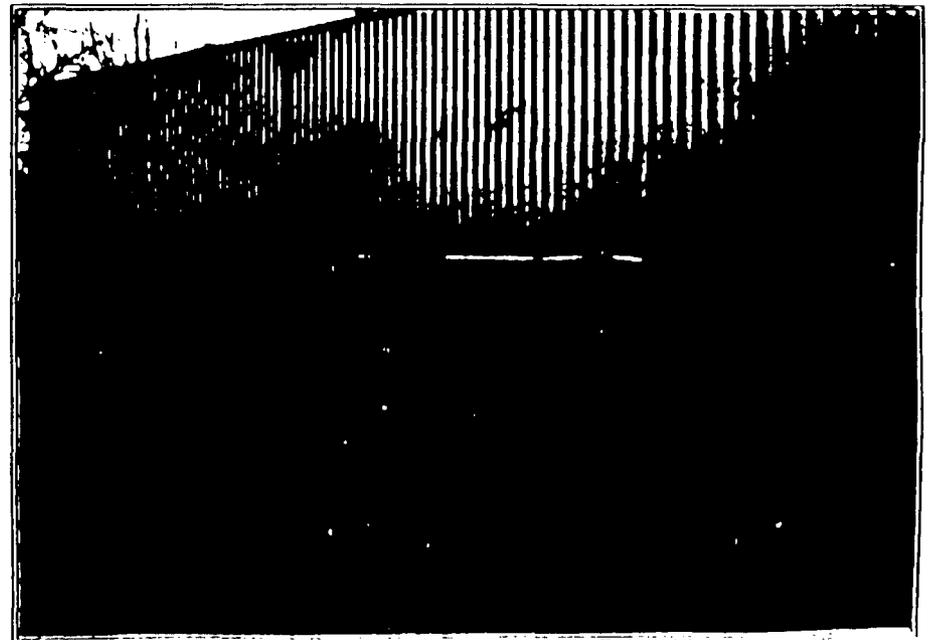
000183

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2126.01



PHOTOGRAPH #19 *by DJL 12/08/92*
North: First layer of topsoil over excavated areas.

000184



PHOTOGRAPH #20 *by DJL 12/08/92*
West-southwest: Final layer of topsoil over excavated areas.



PHOTOGRAPH #21

by DJL:12/08/92

Northwest: Final grading of topsoil, and cleaned asphalt surface in the foreground.

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2125.01

000185

Rexnord Corporation
Soil Excavation Summary Report

January 1993
2125RC01.DJL

APPENDIX B

Manifests and Land Disposal Notification/Certification Forms

1. **UNIFORM HAZARDOUS WASTE MANIFEST** Generator's US EPA ID No. **ILD005433571000034** 2. Page 1 of 1

3. Generator's Name and Mailing Address Location if Different
Exford Corp. Bearing Operation, Attn: Barbara Flood
2400 Cartiss Street, Bensons Grove, Illinois 60515
708-969-1770

4. 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: **708-969-1770**

5. Transporter 1 Company Name **Exvirite** 6. US EPA ID Number **ILD00066620**

7. Transporter 2 Company Name 8. US EPA ID Number

9. Designated Facility Name and Site Address **Exvirite** 10. US EPA ID Number **ILD00066620**
16435 So. Center Avenue
Harvey, Illinois 60426

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers | | 13. Total Quantity | 14. Unit Weight |
|--|----------------|----------|--------------------|-----------------|
| | No. | Type | | |
| 4. RQ Hazardous Waste Solid HOS ORM-B MA9189 (3006) Contains C4 | 001 | C | 00020 | 2 |
| | | | | |
| | | | | |
| | | | | |

J. Additional Description for Materials Listed Above
11.a. H940

K. Handling Codes for Materials Listed Above
 in Para 11. **G = Gallons**
Y = Cubic Yards

15. Special Handling Instructions and Additional Information
GENERATOR EMERGENCY RESPONSE INFORMATION PHONE NUMBER: (708) 969-1770

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **Dan Bevans** Signature _____ Date _____
 Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name _____ Signature _____ Date _____
 Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name _____ Signature _____ Date _____
 Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name _____ Signature _____ Date _____
 Month Day Year

1. Agency is authorized to enforce pursuant to Illinois Revised Statute, 1989 Chapter 112, Section 106 and 107. All this information be submitted to the Agency. Failure to do so is a violation of the Illinois Environmental Protection Act. The penalty against the owner or operator who fails to exceed \$25,000 per day of violation. Expiration of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Permit Management Center.

**LAND DISPOSAL
NOTIFICATION/CERTIFICATION
FORM**



CUSTOMER INFORMATION:

Generator Name: Rexnord Corp., Bearing Operation
 Pickup Address: 1400 Duponts Bldg., Downers Grove, IL 60515
 Generator EPA ID #: ILD005455571 Manifest Document # per Item 1/Item A: 00031 IL 3818889
 Envirite Waste Stream # s: 11a. HS960 11b. _____ 11c. _____ 11d. _____

| MANIFEST ITEM NUMBER | DESCRIPTION OF WASTE* | | | TREATABILITY INFORMATION PER 40 CFR† | | | | |
|----------------------|-----------------------|-------------|--------------------|--------------------------------------|-----------|--------------------------------|--------------------|----------------------|
| | EPA WASTE CODE | SUBCATEGORY | TREATABILITY GROUP | 268.41(a) | 268.43(a) | 268.42(a)(1) TABLE 1 & TABLE 2 | NICKEL** ≥134 mg/l | THALLIUM** ≥130 mg/l |
| 11a | D006 | | Non-Wastewater | X | X | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

* Subcategory references to Acid, Alkaline, Reactive Cyanides, and Reactive Sulfides are understood to be respectively Acid Subcategory - 261.22(a)(1), Alkaline Subcategory - 261.22(a)(1), Reactive Cyanides - 261.23(a)(5), and Reactive Sulfides - 261.23(a)(5). Waste analysis data, where available, accompanies this shipment.
 † Unless otherwise specified, also a "✓" or an "X" retains the CFR sections and paragraphs where the treatment standards appear. When required, the five-letter treatment code is specified.
 ** In liquid hazardous wastes including free liquids associated with any solid or sludge containing this metal (or element). See RCRA section 3004(d).
 ≥ denotes greater than or equal to.

SECTION 1: Restricted Wastes Requiring Treatment prior to Land Disposal

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated does not meet applicable treatment standards set forth in 40 CFR 268 Subpart D or exceeds the applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d); and 2) to apprise the facility of the section(s) and paragraph(s) where the treatment standards appear and, where applicable, the prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Printed Name: _____ Signature/Date: _____

SECTION 2: Restricted Wastes from Generators That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name _____ Signature/Date: _____

SECTION 3: Restricted Wastes from Treatment Facilities That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and treated properly so as to comply with the performance levels specified in 40 CFR Part 268, subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name _____ Signature/Date: _____

ENV-100

RETURN ORIGINAL TO RECEIVING FACILITY - RETAIN COPY FOR YOUR FILES

PLEASE TYPE

Form designed for use on size 11 1/2-inch paper

State Form JPC 82 6/81 LS32-0810

EPA Form 8700-22 (Rev. 9-88)

AND SPECIAL WASTE

Form Approved OMB No. 2030-0089 Expires 1-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **ILD00543557100031**

2. Page 1 of 1

3. Generator's Name and Mailing Address: **Roxford Corp. Bearing Operation, Attn: Barbara Flood, 2400 Curtiss Street, Downs Grove, Illinois 60515**

4. 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: **708-969-1770**

5. Transporter 1 Company Name: **Envirite**

6. US EPA ID Number: **ILD00066620**

7. Transporter 2 Company Name: _____

8. US EPA ID Number: _____

9. Designated Facility Name and Site Address: **Envirite, 16435 So. Center Avenue, Harvey, Illinois 60426**

10. US EPA ID Number: **ILD00066620**

| 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers | | 13. Total Quantity | 14. New Unit Wt/Vol |
|--|----------------|-----------|--------------------|---------------------|
| | No. | Type | | |
| 20 Hazardous Waste Solid HOS ORN-E RA9189 (D006) Contains CA | 001 | CM | 00020 | 2 |
| | | | | |
| | | | | |
| | | | | |

J. Additional Description for Materials Listed Above: **l.i.e. R5960**

K. Handling Codes: **G = Gallons**

15. Special Handling Instructions and Additional Information: **GENERATOR EMERGENCY RESPONSE INFORMATION PHONE NUMBER: (708) 969-1770**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimize the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **Dan Bevans** Signature: _____ Date: _____

17. Transporter 1 Acknowledgement of Receipt of Materials: Printed/Typed Name: _____ Signature: _____ Date: _____

18. Transporter 2 Acknowledgement of Receipt of Materials: Printed/Typed Name: _____ Signature: _____ Date: _____

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19: Printed/Typed Name: _____ Signature: _____ Date: _____

This Agency is authorized to enforce pursuant to those Revised Status 3008 Chapter 111.5 Section 304 and 021 All the information on submitted to the Agency. Failure to report information may result in civil penalties against the owner or operator for 25,000 per day of violation. Fabrication of the information may result in a fine of 10,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Permit Management Center.

**LAND DISPOSAL
NOTIFICATION/CERTIFICATION
FORM**



CUSTOMER INFORMATION:

Generator Name: Rexnord Corp., Bearing Operation
 Pickup Address: 1400 Curtiss St., Downers Grove, IL 60515
 Generator EPA ID #: ILD005455571 Manifest Document # per Item 1/Item A: 00031 IL 3818891
 Envirite Waste Stream #: 11a. HS960 11b. _____ 11c. _____ 11d. _____

| MANIFEST ITEM NUMBER | DESCRIPTION OF WASTE* | | TREATABILITY INFORMATION PER 40 CFR† | | | | | |
|----------------------|-----------------------|-------------|--------------------------------------|-----------|-----------|--------------------------------|--------------------|----------------------|
| | EPA WASTE CODE | SUBCATEGORY | TREATABILITY GROUP | 268.41(a) | 268.43(a) | 268.42(a)(1) TABLE 1 & TABLE 2 | NICKEL** ≥134 mg/l | THALLIUM** ≥130 mg/l |
| 11a | D 0 0 6 | | Non-Wastewater | X | X | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

* Subcategory references to "Acid," "Alkaline," "Reactive Cyanides," and "Reactive Sulfides" are understood to be respectively: Acid Subcategory - 261.22(a)(1); Alkaline Subcategory - 261.22(a)(1); Reactive Cyanides - 261.23(a)(5); and Reactive Sulfides - 261.23(a)(5). Waste analysis data, where available, accompanies this shipment.
 † Unless otherwise specified, also, a "✓" or an "X" relates the CFR sections and paragraphs where the treatment standards appear. When required, the five-letter treatment code is specified.
 ** In liquid hazardous wastes including free liquids associated with any solid or sludge containing this metal (or element). See RCRA section 3004(d).
 ≥ denotes "greater than or equal to."

SECTION 1: Restricted Wastes Requiring Treatment prior to Land Disposal

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated does not meet applicable treatment standards set forth in 40 CFR 268 Subpart D or exceeds the applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d); and 2) to apprise the facility of the section(s) and paragraph(s) where the treatment standards appear and, where applicable, the prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Printed Name: in Bevans Signature/Date: [Signature]

SECTION 2: Restricted Wastes from Generators That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment; and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name: _____ Signature/Date: _____

SECTION 3: Restricted Wastes from Treatment Facilities That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment; and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name: _____ Signature/Date: _____

RETURN ORIGINAL TO RECEIVING FACILITY - RETAIN COPY FOR YOUR FILES

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
ILD005455710001

2. Page 1 of 1
Information on this manifest must be provided by Parties 1, 2, and 3, and is required by Parties 4, 5, and 6.

3. Generator's Name and Mailing Address
Raymond Corp. Bearing Operation, Attn: Barbara Flood
2400 Carleis Street, Downers Grove, Illinois 60515

Location if Different
708-969-1770

4. 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: **708-969-1770**

5. Transporter 1 Company Name
Envirite

6. US EPA ID Number
ILD000666206

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
Envirite
16435 So. Center Avenue
Harvey, Illinois 60426

10. US EPA ID Number
ILD000666206

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers | | 13. Total Quantity | 14. Unit Wt/Vol |
|--|----------------|-----------|--------------------|-----------------|
| | No. | Type | | |
| a. HQ Hazardous Waste Solid HOS ORM-E RA9189 (D006) Contains Cd | 001 | CM | 00020 | 2 |
| b. | | | | |
| c. | | | | |
| d. | | | | |

J. Additional Description for Materials Listed Above
None

15. Special Handling Instructions and Additional Information
GENERATOR EMERGENCY RESPONSE INFORMATION PHONE NUMBER: (708) 969-1770

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **Don Bevens** Signature: _____ Date: _____

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name: _____ Signature: _____ Date: _____

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name: _____ Signature: _____ Date: _____

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name: _____ Signature: _____ Date: _____

GENERATOR
TRANSPORTER
FACILITY

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1989, Chapter 111 1/2, Section 1084 and 1081, that the information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Penalties of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Permit Management Center.

**LAND DISPOSAL
NOTIFICATION/CERTIFICATION
FORM**



CUSTOMER INFORMATION:

Generator Name: Rexnord Corp., Bearing Operation
 Pickup Address: 2400 Curtiss St., Downers Grove, IL 60515
 Generator EPA ID #: ILLD005455571 Manifest Document # per Item 1/Item A: 00031 / IL 3818892
 Envirite Waste Stream #'s: 11a. HS960 11b. _____ 11c. _____ 11d. _____

| MANIFEST ITEM NUMBER | DESCRIPTION OF WASTE* | | | TREATABILITY INFORMATION PER 40 CFR† | | | | |
|----------------------|-----------------------|-------------|--------------------|--------------------------------------|-----------|--------------------------------|--------------------|----------------------|
| | EPA WASTE CODE | SUBCATEGORY | TREATABILITY GROUP | 268.41(a) | 268.43(a) | 268.42(a)(1) TABLE 1 & TABLE 2 | NICKEL** ≥134 mg/l | THALLIUM** ≥130 mg/l |
| 11a | D 0 0 6 | | Non-Wastewater | X | X | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

* Subcategory references to "Acid," "Alkaline," "Reactive Cyanides," and "Reactive Sulfides" are understood to be respectively Acid Subcategory - 261.22(a)(1), Alkaline Subcategory 261.22(a)(1), Reactive Cyanides - 261.23(a)(5), and Reactive Sulfides - 261.23(a)(5). Waste analysis data, where available, accompanies this shipment.
 † Unless otherwise specified, also, a "✓" or an "X" relates the CFR sections and paragraphs where the treatment standards appear. When required, the five-letter treatment code is specific.
 ** In liquid hazardous wastes including free liquids associated with any solid or sludge containing this metal (or element). See RCRA section 3004(d).
 ≥ denotes "greater than or equal to."

SECTION 1: Restricted Wastes Requiring Treatment prior to Land Disposal

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated does not meet applicable treatment standards set forth in 40 CFR 268 Subpart D or exceeds the applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d); and 2) to apprise the facility of the CFR section(s) and paragraph(s) where the treatment standards appear and, where applicable, the prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Printed Name: Jan Devans Signature/Date: [Signature] / [Date]

SECTION 2: Restricted Wastes from Generators That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name: _____ Signature/Date: _____

SECTION 3: Restricted Wastes from Treatment Facilities That Can Be Land Disposed without Further Treatment

The purpose of this section is twofold: 1) to notify the receiving facility specified on the referenced manifest that the waste indicated can be land disposed without further treatment and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d).

I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Printed Name: _____ Signature/Date: _____

RETURN ORIGINAL TO RECEIVING FACILITY - RETAIN COPY FOR YOUR FILES

Rexnord Corporation
Soil Excavation Summary Report

January 1993
2125RC01 DJL

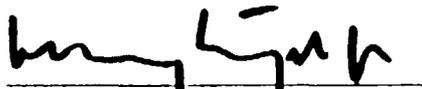
APPENDIX C

Non-Hazardous Certification Certificates

NONHAZARDOUS CERTIFICATION

This is to certify that Hazardous Solid waste received 12/03/92
from Rexnord Corporation, Bearing Operation on manifest
3818889 has been rendered nonhazardous in full compliance with
the terms of Envirite Corporation's delisting petition granted by the U.S. EPA
November 6, 1986.

Having changed this hazardous waste into a nonhazardous material, Envirite
Corporation has eliminated all Rexnord Corporation, Bearing Oper. future hazardous
waste liability for this material under RCRA (Resource Conservation and Recovery
Act of 1976).



Geoffrey Stengul, Jr.
President



Operations Manager

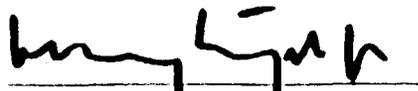
ENVIRITE

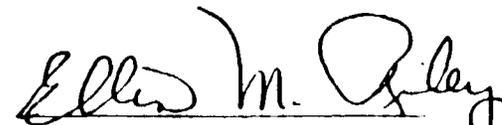
Corporate Headquarters
Plymouth Meeting, Pennsylvania 19462

NONHAZARDOUS CERTIFICATION

This is to certify that Hazardous Solid waste received 12/03/92
from Rexnord Corporation, Bearing Operation on manifest
3818891 has been rendered nonhazardous in full compliance with
the terms of Envirite Corporation's delisting petition granted by the U.S. EPA
November 6, 1986.

Having changed this hazardous waste into a nonhazardous material, Envirite
Corporation has eliminated all Rexnord Corporation, Bearing Oper. future hazardous
waste liability for this material under RCRA (Resource Conservation and Recovery
Act of 1976).


Geoffrey Stenga, Jr.
President

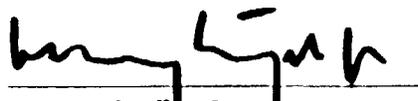

Operations Manager

ENVIRITE
Corporate Headquarters
Plymouth Meeting, Pennsylvania 19462

NONHAZARDOUS CERTIFICATION

This is to certify that Hazardous Solid waste received 12/04/92
from Rexnord Corp. Bearing Operation on manifest
3818892 has been rendered nonhazardous in full compliance with
the terms of Envirite Corporation's delisting petition granted by the U.S. EPA
November 6, 1986.

Having changed this hazardous waste into a nonhazardous material, Envirite
Corporation has eliminated all Rexnord Corp. Bearing Operation future hazardous
waste liability for this material under RCRA (Resource Conservation and Recovery
Act of 1976).



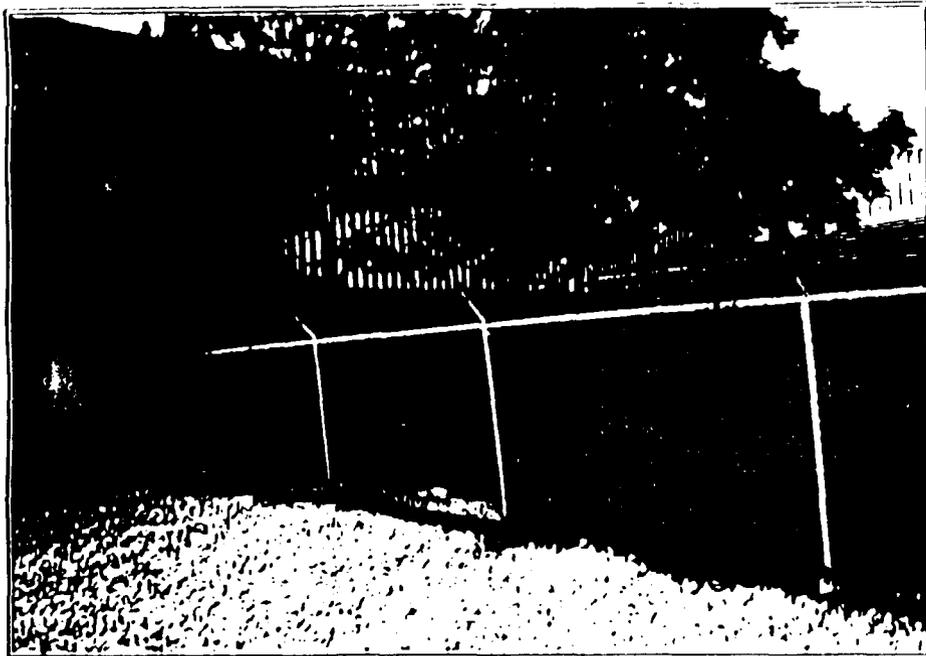
Geoffrey Stenga, Jr.
President



Operations Manager

ENVIRITE

Corporate Headquarters
Plymouth Meeting, Pennsylvania 19462



PHOTOGRAPH #1

by DJL:09/17/92

Northwest: Job site during soil sample collection activities on September 17, 1992.

PHOTO LOG
Rexnord Corp.
Soil Excavation Summary
Downers Grove, Illinois
Project 2126.01



PHOTOGRAPH #2

by DJL:09/17/92

South: Concrete pad and aluminum cover for the large CP.



5/4 20 29

January 22, 1996

Rexnord Corporation
2400 Curtiss Street
Downers Grove, IL 60515
708/969-1770
FAX: 708/969-1612

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Division of Environmental Health
525 - 535 West Jefferson Street
Springfield, IL. 62761-0001

Attn: Richard Petrella, P.E.

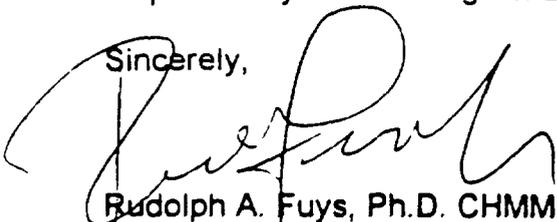
Ref: Site ID 0122564

Dear Mr. Petrella,

Please be advised that our well is no longer used as a source of drinking water. We are now tied into the Village of Downers Grove's water system. This occurred in September of 1995.

We will not be submitting test data in the future, since this type of testing is now the responsibility of the Village of Downers Grove.

Sincerely,



Rudolph A. Fuys, Ph.D. CHMM
Environmental Affairs Manager

BCC
McCarthy
Gibson
D. Iglesias

000197



ILLINOIS DEPARTMENT OF
PUBLIC HEALTH

A Healthier Today For A Better Tomorrow

01/14/95

XNORD
00 CURTISS
WNERS GROVE IL 60515

0122564

AR OWNER/OPERATOR:

THIS OFFICE HAS RECEIVED THE RESULTS OF LEAD AND COPPER ANALYSES PERFORMED ON YOUR NON-TRANSIENT, NON-COMMUNITY PUBLIC WATER SUPPLY. THIS TESTING IS REQUIRED BY UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGULATIONS AND THE DRINKING WATER SYSTEMS CODE ADOPTED BY THIS DEPARTMENT. LABORATORY ANALYSES HAVE SHOWN THAT THE LEAD AND COPPER ACTION LEVELS ESTABLISHED IN THESE RULES HAVE NOT BEEN EXCEEDED IN YOUR WATER SUPPLY IN AN ANNUAL SAMPLING PERIOD. YOU ARE REQUIRED TO CONTINUE SAMPLING ANNUALLY, BY 12/31/1995 FROM THE SAME NUMBER OF TAPS. YOU WILL RECEIVE SEPARATE NOTIFICATION OF TEST RESULTS AND TESTING DUE DATES FOR VOLATILE ORGANIC CHEMICALS, PESTICIDES AND HERBICIDES, AND INORGANIC CHEMICALS.

IF YOU HAVE ANY QUESTIONS CONCERNING THESE REQUIREMENTS, PLEASE CONTACT THIS OFFICE AT (217)782-5830, OR, FOR TDD, (800)547-0466.

SINCERELY,

RICHARD PETRELLA, P.E.
DIVISION OF ENVIRONMENTAL HEALTH

TO: REGION/LOCAL HEALTH DEPARTMENT
PWS02504 SITE ID: 0122564 COUNTY: 043 REGION: 7

000198



ILLINOIS DEPARTMENT OF
PUBLIC HEALTH

A Healthier Today For A Better Tomorrow

04/16/94

EXNORD
400 CURTIS
OWNERS GROVE IL 60515

DEAR OWNER/OPERATOR:

THIS OFFICE HAS RECEIVED THE RESULTS OF LEAD AND COPPER ANALYSES PERFORMED ON YOUR NON-TRANSIENT, NON-COMMUNITY PUBLIC WATER SUPPLY. THIS TESTING IS REQUIRED BY UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGULATIONS AND THE DRINKING WATER SYSTEMS CODE ADOPTED BY THIS DEPARTMENT. LABORATORY ANALYSES HAVE SHOWN THAT THE LEAD AND COPPER ACTION LEVELS ESTABLISHED IN THESE RULES HAVE NOT BEEN EXCEEDED IN YOUR WATER SUPPLY IN THE SECOND 6 MONTH SAMPLING PERIOD. YOU ARE NOW ADVISED THAT YOU MAY REDUCE TESTING FREQUENCY TO ANNUALLY (BY 12/21/94) AS WELL AS REDUCE THE NUMBER OF TAPS SAMPLED BASED ON THE POPULATION YOU SERVE. SEE THE ATTACHED TABLE. YOU WILL RECEIVE SEPARATE NOTIFICATION OF TEST RESULTS AND TESTING DUE DATES FOR VOLATILE ORGANIC CHEMICALS, PESTICIDES AND HERBICIDES, AND INORGANIC CHEMICALS.

SINCERELY,

Richard Petrella

RICHARD PETRELLA, P.E.
DIVISION OF ENVIRONMENTAL HEALTH

CC: REGION/LOCAL HEALTH DEPARTMENT
PWS02305 ID: 0122564 CNTY: 043 REGN: 7

SAME

000199

**LEAD/COPPER RULE
OVERVIEW AND GENERAL INSTRUCTIONS**

Regulation: National Primary Drinking Water Regulations for Lead and Copper 40 CFR Parts 141 & 142 (an amendment to the Safe Drinking Water Act).

Who Is Affected: Community Water Systems and Non-transient, Non-community Water Systems (schools/businesses on their own well(s) serving 25 or more students/employees a day, 6 months per year).

What to Do: Systems are required to collect water samples for lead and copper at selected sites and determine if results are below the action level for lead (.015 mg/l) and copper (1.3 mg/l).

When: Two consecutive six month monitoring periods are required the first year. They begin as shown in Table 1:

| TABLE 1 | Persons Served | 1st | 2nd |
|---------|----------------|--------------|-----------------|
| | | > 3,300 | July 1, 1992 |
| < 3,301 | | July 1, 1993 | January 1, 1994 |

Water Piping Materials Survey: A materials survey conducted prior to sampling must be done to identify proper sampling taps and to assist in the interpretation of results.

- *TIER 1 - Buildings or additions served by the water system are defined as TIER 1 locations if they:
 - have copper pipes with lead soldered joints installed between January 1983, and May 1986.
 - have lead pipes
 - are served by a lead service line
- *TIER 2 - Buildings or additions identified as having copper pipes with lead soldered joints installed before 1983 are TIER 2 locations.

Required Samples: The required number of samples to be collected is based on the student/employee population served by the system (see Table 2).

| TABLE 2 | Population Served | Sample Sites (standard, every 6 mos.) | Sample Sites (reduced, every 12 mos.)* |
|---------|-------------------|---------------------------------------|--|
| | 3,301 to 10,000 | 40 | 20 |
| | 501 to 3,300 | 20 | 10 |
| | 101 to 500 | 10 | 5 |
| | < 100 | 5 | 5 |

*at least 2-6 month periods of base monitoring are required with results below the action levels to qualify for reduced monitoring. After 3 years of annual monitoring (results below action level) further reduction to sampling every 3 years is allowed.

Sample Tap Selection: At TIER 1 locations, identify all taps where cold water is typically drawn for consumption such as kitchen or break room faucets or drinking fountains. (Normally faucets on bathroom sinks are not used for consumption purposes.)



ILLINOIS DEPARTMENT OF
PUBLIC HEALTH

A Healthier Today For A Better Tomorrow

04/16/94

0122564

LEXNORD
1400 CURTISS
OWNERS GROVE IL 60515

DEAR OWNER/OPERATOR:

WE HAVE RECEIVED THE RESULTS OF CHEMICAL ANALYSES PERFORMED ON YOUR WATER SUPPLY IN COMPLIANCE WITH UNITED STATES ENVIRONMENTAL PROTECTION AGENCY (USEPA) REGULATIONS AND THE DRINKING WATER SYSTEMS CODE ADOPTED BY THIS DEPARTMENT. THE TABLE BELOW SHOWS THE STATUS OF EACH CATEGORY TESTED AS REPORTED BY A LABORATORY AND INDICATES WHEN YOU WILL BE REQUIRED TO TEST FOR THESE CONTAMINANTS AGAIN. A "YES" ENTRY IN THE WAIVER GRANTED COLUMN INDICATES THAT, AS THE RESULT OF MEETING CURRENT STANDARDS, YOU ARE GRANTED A WAIVER WHICH ALLOWS A REDUCTION IN FUTURE SAMPLING UNTIL THE DATE SHOWN. IF THE MESSAGE IN THE OVERALL RESULTS COLUMN IS "DETECTS" OR "ABOVE ACCEPTABLE LIMITS," A SEPARATE LETTER IS ENCLOSED.

| CATEGORY OF TEST | TEST DATE | OVERALL RESULTS | WAIVER GRANTED | DATE NEXT TEST DUE |
|------------------------|-----------|-------------------|----------------|--------------------|
| VOLATILE ORG CHEMICALS | 10/12/93 | NO DETECTS | YES | 10/12/99 |
| HERBICIDES/PESTICIDES | 12/21/93 | NO DETECTS | YES | 12/21/96 |
| INORGANICS/METALS | 10/12/93 | ACCEPTABLE LIMITS | NO | 10/12/96 |

BECAUSE THE VULNERABILITY ASSESSMENT PERFORMED BY OUR DEPARTMENT HAS DETERMINED YOUR SUPPLY IS NOT VULNERABLE TO ASBESTOS CONTAMINATION, YOU ARE GRANTED A PERMANENT WAIVER TO INITIAL AND FUTURE SAMPLING FOR ASBESTOS. FURTHER COPPER AND LEAD SAMPLING REQUIREMENTS WILL BE REPORTED TO YOU SEPARATELY.

A REVISED COPY OF THIS LETTER WILL BE SENT TO YOU EACH TIME WE RECEIVE NEW TEST RESULTS. IF YOU HAVE ANY QUESTIONS CONCERNING THESE REQUIREMENTS, PLEASE CONTACT THIS OFFICE AT (217)782-5830.

SINCERELY,

RICHARD PETRELLA, P.E.
DIVISION OF ENVIRONMENTAL HEALTH

CC: REGION/LOCAL HEALTH DEPARTMENT
PWS02301 CNTY: 043 REGN: 7

000201



February 9, 1994

Illinois Department of Public Health
Division of Environmental Health
525 West Jefferson St.
Springfield, IL. 62761

Rexnord Corporation
2400 Curtiss Street
Downers Grove, IL 60515
708/969-1770
FAX: 708/969-1612

Dear Sir:

Enclosed please find 1993 test results for Inorganic Contaminants, Volatile Organic Chemicals, Herbicides and Pesticides. Test results for Lead and Copper for 1993-1994 are also included.

Sincerely,

Rudolph A. Fuys Ph.D., CHMM
Environmental Affairs Manager

RAF\r
:ill29



NATIONAL ENVIRONMENTAL TESTING, INC.

Barrett Division
 150 W. Barrett Rd
 Barrett, IL 60103
 Tel: (708) 289-3100
 Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994

Sample No. : 233721

NET Job No.: 93.09093

Sample Description: Cafeteria Sink; Grab IDPH Analysis

Date Taken: 10/12/1993
 Time Taken: 11:20
 Date Sample Picked Up: 10/12/1993
 IEPA Cert. No. 100221

Date Received: 10/12/1993
 Time Received: 13:00

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|-------------------------------|---------|-------|-------|------------------|-------------------|
| Fluoride | 0.20 | | mg/L | 10/15/1993 | 4500F C(4) 340.2 |
| Turbidity (Drinking Water) | <1 | | NTU | 10/12/1993 | 180.1 (3) |
| Barium, ICP | <0.020 | | mg/L | 11/04/1993 | 6010(4) 200.7(3) |
| Cadmium, ICP | <0.003 | | mg/L | 11/04/1993 | 6010(4) 200.7(3) |
| Chromium, ICP | <0.005 | | mg/L | 11/04/1993 | 6010(1) 200.7(3) |
| Copper, ICP | 0.016 | | mg/L | 11/04/1993 | 6010(1) 200.7(3) |
| Lead, GFAA | <0.0050 | | mg/L | 10/21/1993 | 7421(1) 239.2(3) |
| Mercury, CVAA | <0.0002 | | mg/L | 11/05/1993 | 7470(1) 245.1(3) |
| Selenium, AA | <0.0050 | | mg/L | 10/19/1993 | 7741(1) 270.3(3) |
| SDWA VOLATILE COMPOUNDS 524.2 | | | | | |
| Benzene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Vinyl Chloride | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Carbon Tetrachloride | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| 1,2-Dichloroethane | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Trichloroethylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| 1,1-Dichloroethylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| 1,1,1-Trichloroethane | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| p-Dichlorobenzene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Chlorobenzene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| o-Dichlorobenzene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| cis-1,2-Dichloroethylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| trans-1,2-Dichloroethylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| 1,2-Dichloropropane | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Ethylbenzene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Styrene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Tetrachloroethylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| Toluene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| m,p-Xylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |
| o-Xylene | <0.5 | | ug/L | 10/15/1993 | 524.2 (6) |





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
150 W. Bartlett Rd
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

Sample No. : 204216

NET Job No.: 93.02367

Sample Description: Cafeteria Sink; Grab
IDPH ANALYSIS

Date Taken: 03/30/1993
Time Taken: 11:08
Date Sample Picked Up: 03/30/1993
IEPA Cert. No. 100221

Date Received: 03/30/1993
Time Received: 14:00

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|------------------------------|---------|-------|-------|------------------|-------------------|
| PESTICIDE/PCBs - 508 AQUEOUS | | | | | |
| gamma-BHC (Lindane) | <0.2 | | ug/L | 04/26/1993 | 508 (6) |
| Chlordane | <2.0 | | ug/L | 04/26/1993 | 508 (6) |
| Heptachlor | <0.4 | | ug/L | 04/26/1993 | 508 (6) |
| Heptachlor epoxide | <0.2 | | ug/L | 04/26/1993 | 508 (6) |
| Methoxychlor | <40 | | ug/L | 04/26/1993 | 508 (6) |
| Toxaphene | <3.0 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1016 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1221 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1232 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1242 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1248 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1254 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| PCB-1260 | <0.5 | | ug/L | 04/26/1993 | 508 (6) |
| EDB and DBCP by Mthd 504 | | | | | |
| 1,2-Dibromo-3-chloropropane | <0.2 | | ug/L | 04/21/1993 | 504 |
| Ethylene Dibromide (EDB) | <0.05 | | ug/L | 04/21/1993 | 504 |
| NPD PESTICIDES SDWA Mthd 507 | | | | | |
| Alachlor | <2.0 | | ug/L | 04/09/1993 | 507 |
| Atrazine | <3.0 | | ug/L | 04/09/1993 | 507 |
| PCB SCREEN Method 508A | | | | | |
| Decachlorobiphenyl (DCB) | <0.5 | | ug/L | 04/17/1993 | 508A |





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
 350 W. Bartlett Rd
 Bartlett, IL 60103
 Tel: (708) 289-3100
 Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994
 Sample No. : 204216
 NET Job No.: 93.02367

Sample Description: Cafeteria Sink; Grab
 IDPH ANALYSIS

Date Taken: 03/30/1993
 Time Taken: 11:08
 Date Sample Picked Up: 03/30/1993
 IEPA Cert. No. 100221

Date Received: 03/30/1993
 Time Received: 14:00
 WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|--------------------------------|---------|-------|-------|------------------|-------------------|
| CHLORINATED ACIDS Mthd 515.1 | | | | | |
| 2,4-Dichlorophenoxyacetic Acid | <70. | | ug/L | 04/21/1993 | 515.1 |
| Pentachlorophenol (PCP) | <1.0 | | ug/L | 04/21/1993 | 515.1 |
| 2,4,5-TP (Silvex) | <50. | | ug/L | 04/21/1993 | 515.1 |
| CARBAMATES SDWA Method 531.1 | | | | | |
| Aldicarb | <3.0 | | ug/L | 04/08/1993 | 531.1 |
| Aldicarb sulfone | <2.0 | | ug/L | 04/08/1993 | 531.1 |
| Aldicarb sulfoxide | <4.0 | | ug/L | 04/08/1993 | 531.1 |
| Carbofuran | <40. | | ug/L | 04/08/1993 | 531.1 |





ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994

Sample No. : 218742

NET Job No.: 93.05747

Sample Description: Shop Cafeteria Sink; Grab

Date Taken: 07/07/1993
 Time Taken: 13:40
 Date Sample Picked Up: 07/07/1993
 IEPA Cert. No. 100221

Date Received: 07/07/1993
 Time Received: 15:05

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|------------------------------|---------|-------|-------|------------------|-------------------|
| PESTICIDE/PCBs - 508 AQUEOUS | | | | | |
| gamma-BHC (Lindane) | <0.2 | | ug/L | 07/22/1993 | 508 (6) |
| Chlordane | <2.0 | | ug/L | 07/22/1993 | 508 (6) |
| Heptachlor | <0.4 | | ug/L | 07/22/1993 | 508 (6) |
| Heptachlor epoxide | <0.2 | | ug/L | 07/22/1993 | 508 (6) |
| Methoxychlor | <40 | | ug/L | 07/22/1993 | 508 (6) |
| Toxaphene | <3.0 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1016 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1221 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1232 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1242 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1248 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1254 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| PCB-1260 | <0.5 | | ug/L | 07/22/1993 | 508 (6) |
| EDB and DBCP by Mthd 504 | | | | | |
| 1,2-Dibromo-3-chloropropane | <0.2 | | ug/L | 07/29/1993 | 504 |
| Ethylene Dibromide (EDB) | <0.05 | | ug/L | 07/29/1993 | 504 |
| NPD PESTICIDES SDWA Mthd 507 | | | | | |
| Alachlor | <2.0 | | ug/L | 07/28/1993 | 507 |
| Atrazine | <3.0 | | ug/L | 07/28/1993 | 507 |
| PCB SCREEN Method 508A | | | | | |
| Decachlorobiphenyl (DCB) | <0.5 | | ug/L | 07/23/1993 | 508A |





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
 850 W. Bartlett Rd
 Bartlett, IL 60103
 Tel: (708) 289-3100
 Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994
 Sample No. : 218742
 NET Job No.: 93.05747

Sample Description: Shop Cafeteria Sink; Grab

Date Taken: 07/07/1993
 Time Taken: 13:40
 Date Sample Picked Up: 07/07/1993
 IEPA Cert. No. 100221

Date Received: 07/07/1993
 Time Received: 15:05
 WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|--------------------------------|---------|-------|-------|------------------|-------------------|
| CHLORINATED ACIDS Mthd 515.1 | | | | | |
| 2,4-Dichlorophenoxyacetic Acid | <70 | | ug/L | 07/24/1993 | 515.1 |
| Pentachlorophenol (PCP) | <1.0 | | ug/L | 07/24/1993 | 515.1 |
| 2,4,5-TP (Silvex) | <50 | | ug/L | 07/24/1993 | 515.1 |
| CARBAMATES SDWA Method 531.1 | | | | | |
| Aldicarb | <3.0 | | ug/L | 07/27/1993 | 531.1 |
| Aldicarb sulfone | <2.0 | | ug/L | 07/27/1993 | 531.1 |
| Aldicarb sulfoxide | <4.0 | | ug/L | 07/27/1993 | 531.1 |
| Carbofuran | <40 | | ug/L | 07/27/1993 | 531.1 |





NATIONAL ENVIRONMENTAL TESTING, INC.

Barnett Division
 150 W. Barnett Rd
 Barnett, IL 60103
 Tel: (708) 289-3100
 Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994

Sample No. : 233721

NET Job No.: 93.09093

Sample Description: Cafeteria Sink; Grab
 IDPH Analysis

Date Taken: 10/12/1993
 Time Taken: 11:20
 Date Sample Picked Up: 10/12/1993
 IEPA Cert. No. 100221

Date Received: 10/12/1993
 Time Received: 13:00

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|------------------------------|---------|-------|-------|------------------|-------------------|
| PESTICIDE/PCBs - 508 AQUEOUS | | | | | |
| gamma-BHC (Lindane) | <0.2 | | ug/L | 10/15/1993 | 508 (6) |
| Chlordane | <2.0 | | ug/L | 10/15/1993 | 508 (6) |
| Heptachlor | <0.4 | | ug/L | 10/15/1993 | 508 (6) |
| Heptachlor epoxide | <0.2 | | ug/L | 10/15/1993 | 508 (6) |
| Methoxychlor | <40.0 | | ug/L | 10/15/1993 | 508 (6) |
| Toxaphene | <3.0 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1016 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1221 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1232 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1242 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1248 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1254 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| PCB-1260 | <0.5 | | ug/L | 10/15/1993 | 508 (6) |
| EDB and DBCP by Mthd 504 | | | | | |
| 1,2-Dibromo-3-chloropropane | <0.2 | S | ug/L | 10/21/1993 | 504 |
| Ethylene Dibromide (EDB) | <0.05 | S | ug/L | 10/21/1993 | 504 |
| MPD PESTICIDES SDWA Mthd 507 | | | | | |
| Alachlor | <2.0 | S | ug/L | 10/19/1993 | 507 |
| Atrazine | <3.0 | S | ug/L | 10/19/1993 | 507 |
| PCB SCREEN Method 508A | | | | | |
| Decachlorobiphenyl (DCB) | <0.5 | S | ug/L | 10/15/1993 | 508A |

S : Parameter analysis was sub-contracted to another lab location.





NATIONAL ENVIRONMENTAL TESTING, INC.

Barrett Division
350 W. Barrett Rd
Barrett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

Sample No. : 233721

NET Job No.: 93.09093

Sample Description: Cafeteria Sink; Grab
IDPH Analysis

Date Taken: 10/12/1993
Time Taken: 11:20
Date Sample Picked Up: 10/12/1993
IEPA Cert. No. 100221

Date Received: 10/12/1993
Time Received: 13:00

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|--------------------------------|---------|-------|-------|------------------|-------------------|
| CHLORINATED ACIDS Mthd 515.1 | | | | | |
| 2,4-Dichlorophenoxyacetic Acid | <70.0 | S | ug/L | 10/25/1993 | 515.1 |
| Pentachlorophenol (PCP) | <1.0 | S | ug/L | 10/25/1993 | 515.1 |
| 2,4,5-TP (Silvex) | <50.0 | S | ug/L | 10/25/1993 | 515.1 |
| CARBAMATES SDWA Method 531.1 | | | | | |
| Aldicarb | <1.0 | | ug/L | 11/01/1993 | 531.1 |
| Aldicarb sulfone | <2.0 | | ug/L | 11/01/1993 | 531.1 |
| Aldicarb sulfoxide | <2.0 | | ug/L | 11/01/1993 | 531.1 |
| Carbofuran | <1.5 | | ug/L | 11/01/1993 | 531.1 |

S : Parameter analysis was sub-contracted to another lab location.





NATIONAL ENVIRONMENTAL TESTING, INC.

Barrett Division
 350 W. Barrett Rd
 Barrett, IL 60108
 Tel: (708) 289-3100
 Fax: (708) 289-5445

CASE NARRATIVE

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994

NET Job Number: 93.11364

Project Description: IDPH ANALYSIS

| Sample Number | Sample Description | Date Taken | Date Received |
|---------------|----------------------------|------------|---------------|
| 244744 | #1 Nurses Office Sink | 12/21/1993 | 12/21/1993 |
| 244745 | #2 Front Office South D.F. | 12/21/1993 | 12/22/1993 |
| 244746 | #3 IBM Basement D.F. | 12/21/1993 | 12/22/1993 |
| 244747 | #4 Front Cafeteria D.F. | 12/21/1993 | 12/22/1993 |
| 244748 | #5 Beam H2 D.F. | 12/21/1993 | 12/22/1993 |
| 244749 | #6 Heat Treat D.F. | 12/21/1993 | 12/22/1993 |
| 244750 | #7 Shop Cafeteria D.F. | 12/21/1993 | 12/22/1993 |
| 244751 | #8 F-16 D.F. | 12/21/1993 | 12/22/1993 |
| 244752 | #9 A-17 D.F. | 12/21/1993 | 12/22/1993 |
| 244753 | #10 J-13 D.F. | 12/21/1993 | 12/22/1993 |
| 244754 | Shop Cafeteria Sink | 12/21/1993 | 12/22/1993 |
| 244755 | Trip Blank | 12/21/1993 | 12/22/1993 |

Sample analysis in support of the project referenced above has been completed and results are presented on the following pages. Please refer to the enclosed "Key to Abbreviations" for definition of terms.

The following comments should be noted for the indicated fraction;

Pesticide Analysis

All sample holding times were met.

The associated spike recovery for the analysis of Aldicarb was outside of QC control limits for sample #244754. There was insufficient sample for a re-analysis and the results of the initial analysis are presented.

Should you have questions regarding procedures or results, please do not hesitate to call. NET has been pleased to provide these analytical services for you.

Approved By:

Neal E. Cleghorn
 Operations Manager





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
350 W. Bartlett Rd
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

Sample No. : 244754

NET Job No.: 93.11364

Sample Description: Shop Cafeteria Sink
IDPH ANALYSIS

Date Taken: 12/21/1993
Time Taken: 14:30
Date Sample Picked Up: 12/22/1993
IEPA Cert. No. 100221

Date Received: 12/22/1993
Time Received: 16:30

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|-------------------------------------|---------|-------|-------|------------------|-------------------|
| PESTICIDE/PCBs - 508 AQUEOUS | | | | | |
| gamma-BHC (Lindane) | <0.02 | | ug/L | 01/06/1994 | 508 (6) |
| Chlordane | <0.20 | | ug/L | 01/06/1994 | 508 (6) |
| Heptachlor | <0.04 | | ug/L | 01/06/1994 | 508 (6) |
| Heptachlor epoxide | <0.02 | | ug/L | 01/06/1994 | 508 (6) |
| Methoxychlor | <0.10 | | ug/L | 01/06/1994 | 508 (6) |
| Toxaphene | <1.0 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1016 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1221 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1232 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1242 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1248 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1254 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| PCB-1260 | <0.5 | | ug/L | 01/06/1994 | 508 (6) |
| EDB and DBCP by Mthd 504 | | | | | |
| 1,2-Dibromo-3-chloropropane | <0.2 | | ug/L | 01/11/1994 | 504 |
| Ethylene Dibromide (EDB) | <0.05 | | ug/L | 01/11/1994 | 504 |
| NPD PESTICIDES SDWA Mthd 507 | | | | | |
| Alachlor | <0.2 | | ug/L | 01/05/1994 | 507 |
| Atrazine | <0.10 | | ug/L | 01/05/1994 | 507 |
| PCB SCREEN Method 508A | | | | | |
| Decachlorobiphenyl (DCB) | <0.5 | | ug/L | 01/06/1994 | 508A |





NATIONAL ENVIRONMENTAL TESTING, INC.

Barrett Division
 350 W. Barrett Rd
 Barrett, IL 60103
 Tel: (708) 289-3100
 Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
 REXNORD CORP.
 2400 Curtis Street
 Downers Grove, IL 60515

02/03/1994

Sample No. : 244754

NET Job No.: 93.11364

Sample Description: Shop Cafeteria Sink
 IDPH ANALYSIS

Date Taken: 12/21/1993
 Time Taken: 14:30
 Date Sample Picked Up: 12/22/1993
 IEPA Cert. No. 100221

Date Received: 12/22/1993
 Time Received: 16:30

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|--------------------------------|---------|-------|-------|------------------|-------------------|
| CHLORINATED ACIDS Mthd 515.1 | | | | | |
| 2,4-Dichlorophenoxyacetic Acid | <70 | | ug/L | 12/28/1993 | 515.1 |
| Pentachlorophenol (PCP) | <1.0 | | ug/L | 12/28/1993 | 515.1 |
| 2,4,5-TP (Silvex) | <50 | | ug/L | 12/28/1993 | 515.1 |
| CARBAMATES SDWA Method 531.1 | | | | | |
| Aldicarb | <3.0 | * | ug/L | 01/04/1994 | 531.1 |
| Aldicarb sulfone | <2.0 | | ug/L | 01/04/1994 | 531.1 |
| Aldicarb sulfoxide | <4.0 | | ug/L | 01/04/1994 | 531.1 |
| Carbofuran | <40 | | ug/L | 01/04/1994 | 531.1 |

* See Case Narrative.





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
350 W Bartlett Rd.
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

Sample No. : 247473

NET Job No.: 94.00336

Sample Description: Shop Cafeteria; Grab IDPH

Date Taken: 01/19/1994
Time Taken: 14:15
Date Sample Picked Up: 01/19/1994
IEPA Cert. No. 100221

Date Received: 01/19/1994
Time Received: 15:10

WDNR Cert. No. 999447130

| Parameter | Results | Flags | Units | Date of Analysis | Analytical Method |
|------------------------------|---------|-------|-------|------------------|-------------------|
| CARBAMATES SDWA Method 531.1 | | | | | |
| Aldicarb | <3.0 | | ug/L | 01/20/1994 | 531.1 |
| Aldicarb sulfone | <2.0 | | ug/L | 01/20/1994 | 531.1 |
| Aldicarb sulfoxide | <4.0 | | ug/L | 01/20/1994 | 531.1 |
| Carbaryl | <2.0 | | ug/L | 01/20/1994 | 531.1 |
| Carbofuran | <4.0 | | ug/L | 01/20/1994 | 531.1 |
| 3-Hydroxycarbofuran | <2.0 | | ug/L | 01/20/1994 | 531.1 |
| Methomyl | <0.5 | | ug/L | 01/20/1994 | 531.1 |
| Oxamyl (Vydate) | <2.0 | | ug/L | 01/20/1994 | 531.1 |

Protect Results of



LEAD/COPPER SAMPLE DATA REPORTING FORM

(Complete 1 form for each water system according to instructions)

WATER SYSTEM DATA:

- (0) For monitoring period: 12 / 31 / 93 6
ending date length in months
- (1) Facility Name REXNORD CORP. BEARING OP. (2) I.D. # _____
- (3) Mailing Address 2400 CURTISS ST.
- (4) City/State/Zip DOWNERS GROVE, IL 60515
- (5) Telephone 708-7192543 (6) Population served 325

Please make corrections to the above information where appropriate.

- (7) Name of Certified Laboratory: NET

SAMPLE SITES

- (8) Number of samples required 10
- (9) Number of Tier 1 sites found 0
- (10) Number of Tier 1 sites sampled 0
- (11) Number of Tier 2 sites found 12
- (12) Number of Tier 2 sites sampled 10
- (13) Check here if new samples sites used (after 1st period) _____
- (14) Explain below if:
- a. Less than number of samples on Table 2 were taken.
 - b. Any Tier 2 sample sites were used.
 - c. New sample sites not used in the previous monitoring period were used in this monitoring period.

LEAD/COPPER SAMPLE DATA REPORTING FORM

(Complete 1 form for each water system according to instructions)

WATER SYSTEM DATA:

- (0) For monitoring period: 6 / 30 / 94 6
ending date length in months
- (1) Facility Name REXNORD BEARING OPERATION (2) I.D. # _____
- (3) Mailing Address 2400 CURTISS ST.
- (4) City/State/Zip DOWNERS GROVE, IL. 60515
- (5) Telephone 708-719-2343 (6) Population served 325

Please make corrections to the above information where appropriate.

- (7) Name of Certified Laboratory: NET

SAMPLE SITES

- (8) Number of samples required 10
- (9) Number of Tier 1 sites found 0
- (10) Number of Tier 1 sites sampled 0
- (11) Number of Tier 2 sites found 12
- (12) Number of Tier 2 sites sampled 10
- (13) Check here if new sample sites used (after 1st period) X
- (14) Explain below if:
- a. Less than number of samples on Table 2 were taken.
 - b. Any Tier 2 sample sites were used.
 - c. New sample sites not used in the previous monitoring period were used in this monitoring period.

c. Sample two sites not previously sampled.

000218



**NATIONAL
ENVIRONMENTAL
TESTING, INC.**

Bartlett Division
350 W. Bartlett Rd.
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

CORRECTED REPORT

02/03/1994

NET Job Number: 93.05747

Enclosed are the Analytical Results for the following samples submitted to NET, Inc. Bartlett Division for analysis:

Project Description:

| Sample Number | Sample Description | Date Taken | Date Received |
|---------------|-------------------------------|------------|---------------|
| 218732 | Nurses Office; Grab | 07/07/1993 | 07/07/1993 |
| 218733 | Front Office South; Grab | 07/07/1993 | 07/07/1993 |
| 218734 | Front Office North; Grab | 07/07/1993 | 07/07/1993 |
| 218735 | IBM Basement; Grab | 07/07/1993 | 07/07/1993 |
| 218736 | Heat Treat; Grab | 07/07/1993 | 07/07/1993 |
| 218737 | Shop Cafeteria Fountain; Grab | 07/07/1993 | 07/07/1993 |
| 218738 | Shop Cafeteria Sink; Grab | 07/07/1993 | 07/07/1993 |
| 218739 | Front Cafeteria; Grab | 07/07/1993 | 07/07/1993 |
| 218740 | F16; Grab | 07/07/1993 | 07/07/1993 |
| 218741 | A17; Grab | 07/07/1993 | 07/07/1993 |
| 218742 | Shop Cafeteria Sink; Grab | 07/07/1993 | 07/07/1993 |

Sample analysis in support of the project referenced above has been completed and results are presented on the following pages. These results apply only to the samples analyzed. Reproduction of this report only in whole is permitted. Please refer to the enclosed "Key to Abbreviations" for definition of terms. Should you have questions regarding procedures or results, please do not hesitate to call. NET has been pleased to provide these analytical services for you.

Approved By:

Neal E. Cleghorn
Operations Manager





NATIONAL ENVIRONMENTAL TESTING, INC.

Bartlett Division
350 W. Bartlett Rd.
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

CASE NARRATIVE

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

NET Job Number: 93.11364

Project Description: IDPH ANALYSIS

| Sample Number | Sample Description | Date Taken | Date Received |
|---------------|----------------------------|------------|---------------|
| 244744 | #1 Nurses Office Sink | 12/21/1993 | 12/21/1993 |
| 244745 | #2 Front Office South D.F. | 12/21/1993 | 12/22/1993 |
| 244746 | #3 IBM Basement D.F. | 12/21/1993 | 12/22/1993 |
| 244747 | #4 Front Cafeteria D.F. | 12/21/1993 | 12/22/1993 |
| 244748 | #5 Beam H2 D.F. | 12/21/1993 | 12/22/1993 |
| 244749 | #6 Heat Treat D.F. | 12/21/1993 | 12/22/1993 |
| 244750 | #7 Shop Cafeteria D.F. | 12/21/1993 | 12/22/1993 |
| 244751 | #8 F-16 D.F. | 12/21/1993 | 12/22/1993 |
| 244752 | #9 A-17 D.F. | 12/21/1993 | 12/22/1993 |
| 244753 | #10 J-13 D.F. | 12/21/1993 | 12/22/1993 |
| 244754 | Shop Cafeteria Sink | 12/21/1993 | 12/22/1993 |
| 244755 | Trip Blank | 12/21/1993 | 12/22/1993 |

Sample analysis in support of the project referenced above has been completed and results are presented on the following pages. Please refer to the enclosed "Key to Abbreviations" for definition of terms.

The following comments should be noted for the indicated fraction;

Pesticide Analysis

All sample holding times were met.

The associated spike recovery for the analysis of Aldicarb was outside of QC control limits for sample #244754. There was insufficient sample for a re-analysis and the results of the initial analysis are presented.

Should you have questions regarding procedures or results, please do not hesitate to call. NET has been pleased to provide these analytical services for you.

Approved By:

Neal E. Cleghorn
Operations Manager

000222





NATIONAL
ENVIRONMENTAL
TESTING, INC.

Bartlett Division
350 W. Bartlett Rd.
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

31 January 1994

Mr. Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

RE: IDPH Sampling and Analysis

Dear Mr. Fuys:

Enclosed are the re-analysis results for samples collected on January 19, 1994. The "Shop Cafeteria" sample was re-analyzed for carbamate compounds due to quality control indicators out of control on the initial analysis.

Four additional samples; #2, #3, #8 and #9, were collected and re-analyzed for Lead and Copper. The initial analysis results were outside ranges found in historical data for those same sampling sites. The re-analysis results are presented in this report.

As we discussed on the phone, there will be no additional charge for the sampling and analysis of samples collected on 1/19/94.

If after reviewing these results you have any questions, please feel free to call. NET has been pleased to provide these analytical services for you.

Sincerely,

National Environmental Testing

Neal E. Cleghorn
Operations Manager

000223





NATIONAL
ENVIRONMENTAL
TESTING, INC.

Bartlett Division
850 W. Bartlett Rd.
Bartlett, IL 60103
Tel: (708) 289-3100
Fax: (708) 289-5445

ANALYTICAL REPORT

Mr Rudy Fuys
REXNORD CORP.
2400 Curtis Street
Downers Grove, IL 60515

02/03/1994

NET Job Number: 94.00336

Enclosed are the Analytical Results for the following samples submitted to NET, Inc. Bartlett Division for analysis:

Project Description: IDPH

| Sample Number | Sample Description | Date Taken | Date Received |
|---------------|----------------------------------|------------|---------------|
| 247469 | #2 Front Office South D.F.; Grab | 01/19/1994 | 01/19/1994 |
| 247470 | #3 IBM Basement D.F.; Grab | 01/19/1994 | 01/19/1994 |
| 247471 | #8 F-16 D.F.; Grab | 01/19/1994 | 01/19/1994 |
| 247472 | #9 A-17 D.F.; Grab | 01/19/1994 | 01/19/1994 |
| 247473 | Shop Cafeteria; Grab | 01/19/1994 | 01/19/1994 |

Sample analysis in support of the project referenced above has been completed and results are presented on the following pages. These results apply only to the samples analyzed. Reproduction of this report only in whole is permitted. Please refer to the enclosed "Key to Abbreviations" for definition of terms. Should you have questions regarding procedures or results, please do not hesitate to call. NET has been pleased to provide these analytical services for you.

Approved By:

Neal E. Cleghorn
Operations Manager



TO: G. BEYER

CC J. IGLESIAS
P. CASPER

FROM: R. FUYS *RF*

DATE: 3/10/95

TOPIC: DRINKING WATER ANALYSIS

GEORGE:

ANALYSIS OF THE FRONT OFFICE SOUTH WATER FOUNTAIN DRINKING WATER INDICATED IT EXCEEDED THE ACTION LIMIT FOR COPPER.

LIMIT IS 1300 PPB. TEST RESULT IN DECEMBER WAS 4280 PPB AND A FOLLOW UP TEST RESULT MORE RECENTLY WAS 2420 PPB.

TEST REPORTS ARE ATTACHED.

PLEASE SHUT DOWN THIS WATER FOUNTAIN AND DETERMINE THE CAUSE OF THE HIGH COPPER CONTENT IN THE WATER.

SOME POSSIBLE CAUSES OF EXCESS COPPER MAY BE: FOUNTAIN UNIT COMPONENTS, RO WATER HOOKED IN RATHER THAN JUST SOFTENED WATER, POOR SWEATED JOINTS CAUSING COPPER EROSION ETC.

LET ME KNOW WHEN THE WORK HAS BEEN COMPLETED AND I WILL HAVE ANOTHER WATER SAMPLE ANALYZED FOR COPPER TO VERIFY WE HAVE SOLVED THE PROBLEM.

Water fountain was replaced. RF

000225



Enviro-Test/Perry Laboratories, Inc.
Chicago Dairy & Food Laboratories

319 OGDEN AVENUE DOWNERS GROVE, IL 60515-3142 (708) 963-4672 FAX # (708) 963-4685

IEPA 100186

CERTIFIED LABORATORY REPORT

IDPH 17134

Rexnord, Inc.
 Mr. Rudy Fuys
 2400 Curtiss St.
 Downers Grove, IL 60515

December 19, 1994
 Received: 12-02-94
 Completed: 12-19-94
 P.O. #: WE-133047

Lab No. Sample Identification

| | | | |
|-------|--------------------------|----------|-------|
| NO818 | NURSES' SINK | 12-12-94 | 6:52A |
| NO819 | F OFFICE SOUTH FOUNT. | 12-02-94 | 6:48A |
| NO820 | FRONT CAFETERIA | 12-02-94 | 6:50A |
| NO821 | HEAT TREAT. DEPT. FOUNT. | 12-02-94 | 6:44A |
| NO822 | SHOP CAFETERIA FOUNT. | 12-02-94 | 6:40A |

Lead By Graphite (ppb) Copper (ppb)

| | | | |
|-------|------|-------|------------------------|
| NO818 | LT 5 | 199 | |
| NO819 | LT 5 | 4,280 | > ACTION level of 1300 |
| NO820 | LT 5 | 453 | |
| NO821 | LT 5 | 102 | |
| NO822 | LT 5 | 96 | |

LT means Less Than

LEAD: Current Maximum Allowable Concentration according to the USEPA is 15.0 ppb
 IEPA Action Level November 1992 is 15.0 ppb.
 Current Maximum Contaminant Level according to the IDPH is 15.0 ppb.

All results are total and in ppm(mg/l) unless otherwise noted; 1ppm = 1000ppb.
 Approved for the examination of water, dairy, chemical, microbiological and
 container testing by the ILDPH and ILEPA.

000226

I certify that I am familiar with the information contained in this report
 and that to the best of my knowledge and belief such information
 is true, complete and accurate.

G.P. Lenos
 G.P. Lenos
 Laboratory Director



Enviro-Test/Perry Laboratories, Inc.
Chicago Dairy & Food Laboratories

319 OGDEN AVENUE DOWNERS GROVE, IL 60515-3142 (708) 963-4672 FAX # (708) 963-4685

IEPA 100186

CERTIFIED LABORATORY REPORT

IDPH 17134

Rexnord, Inc.
Mr. Rudy Fuys
2400 Curtiss St.
Downers Grove, IL 60515

February 17, 1995
Received: 02-09-95
Completed: 02-17-95
P.O. #: WE-133047

Lab No. Sample Identification

N2051 South Fountain 02-09-95 2:15P

Test Parameter N2051

Copper (ppb) 2,420

All results are total and in ppm(mg/l) unless otherwise noted; 1ppm = 1000ppb.
Approved for the examination of water, dairy, chemical, microbiological and
container testing by the ILDPH and ILEPA.

000227

I certify that I am familiar with the information contained in this report
and that to the best of my knowledge and belief such information
is true, complete and accurate.


G.N. Lenos
Laboratory Director



Enviro-Test/Perry Laboratories, Inc.
Chicago Dairy & Food Laboratories

319 OGDEN AVENUE DOWNERS GROVE, IL 60515-3142 (708) 963-4672 FAX # (708) 963-4685

IEPA 100186

CERTIFIED LABORATORY REPORT

IDPH 17134

Rexnord, Inc.
Mr. Rudy Fuys
2400 Curtiss St.
Downers Grove, IL 60515

May 04, 1995
Received: 04-19-95
Completed: 05-04-95
P.O. #: WE-133047

Lab No. Sample Identification

N3859 South Office Drinking Fountain 04-19-95 7:00AM

Test Parameter N3859

Copper (ppb) 3,210

All results are total and in ppm(mg/l) unless otherwise noted; 1ppm = 1000ppb.
Approved for the examination of water, dairy, chemical, microbiological and
container testing by the ILDPH and ILEPA.

000228

I certify that I am familiar with the information contained in this report
and that to the best of my knowledge and belief such information
is true, complete and accurate.


G.P. Lenos
Laboratory Director

November 2, 1992

Non-Transient, Non-Community Public Water Supplies

Dear Owner/Operator:

The United States Environmental Protection Agency (USEPA) has adopted regulations which require that your non-transient, non-community public water supply be analyzed for more than 40 chemicals, which can be grouped as follows: Lead and Copper; Inorganic Contaminants; Volatile Organic Chemicals; and Herbicides and Pesticides. These USEPA requirements have also been adopted in the Department's Drinking Water System Code. The following is a list of chemicals for which sampling and laboratory analysis must be performed, and the dates by which this sampling and analysis must be completed with results sent to this Department:

1) Lead and Copper

The attached "Fact Sheet: National Primary Drinking Water Regulations for Lead and Copper (May 1991)" explains the new USEPA regulations pertaining to lead and copper sampling and analysis. You should read this carefully. Supplies serving 3300 or less people daily must begin sampling by July 1, 1993. Samples must be taken from the number of sampling taps shown on page 7 of the attached Fact Sheet based upon population served. For example, if your supply serves a daily population of 600, you will be required to collect samples for lead and copper from 20 sampling locations. Supplies which exceed the action levels for lead and copper (0.015 mg/l and 1.3 mg/l respectively) in more than 10% of the samples collected will be required to implement corrosion control and education programs.

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2) Inorganic Contaminants

Testing for the following inorganic chemicals must begin no later than January 1, 1993, and be completed with the results submitted to this Department by January 1, 1994. Thereafter, supplies using groundwater as a source must re-sample once every three (3) years, and supplies using surface water as a source must re-sample annually. If the test results show the maximum contaminant levels are exceeded, more frequent sampling is required.

| <u>Chemical</u> | <u>Maximum Contaminant Level</u> | |
|-----------------|----------------------------------|--------|
| Barium | 2.0 mg/l | |
| Cadmium | 0.005 mg/l | |
| Chromium | 0.1 mg/l | |
| Fluoride | 4.0 mg/l | 000229 |
| Mercury | 0.002 mg/l | |
| Selenium | 0.05 mg/l | |



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RESEARCH CENTER

July 6, 1964

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Mr. Roy W. Roush, Chairman
Downers Grove Sanitary District
5118 North Main Street
Downers Grove, Illinois

~~R. W. ROUSH~~
~~M. A. KENNEDY~~
~~J. H. GIBSON~~
~~W. J. GIBSON~~

Dear Mr. Roush:

This letter confirms the conversations which we have had with Mr. McEwan and you concerning the possibility of allowing the rinse water from the plating department to enter the sanitary sewer.

Based on the concentrations indicated in a letter from Mr. Klassen of the Illinois Sanitary Water Board, the following determinations were made. In Mr. Klassen's letter, it was reported that the waste flow contained 1.0 ppm of chromate, 2.3 ppm of cyanide, and 1.0 ppm of copper. The flow from the plant is approximately 20 gpm over a 24-hour period. The flow rate is essentially uniform throughout the day. It was also assumed that the flow to the Downers Grove Sewage Plant is 3 mgd (2100 gpm). The equivalent weight rate of flow from our plant is 240,000 lbs of water. On this basis, 0.24 lbs of chromate, 0.552 lbs of cyanide, and 0.245 lbs of copper are discharged per day. The dilution factor at the point of entry of the sewage flow to the sewage treatment plant is 1 to 105. Using this dilution factor, one obtains 0.0095 ppm of chromate, 0.0219 ppm of cyanide, and 0.0097 ppm of copper as representing those concentrations which would occur in the sewage entering the plant.

One can see that the concentrations of the pollutants, as well as the total poundage of pollutants, is minute. At the concentration levels indicated above, it is our opinion that the sewage treatment plant could handle this

REX CHAINBELT INC

Mr. Roy W. Roush

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flow without deleterious effect on the treatment process. The literature indicates that concentrations of 2 ppm of cyanide can be handled by the activated sludge process without deterioration of the treatment efficiency. The copper and chromate levels are certainly within a safe range as well.

We are prepared to take steps to prevent any spillages of concentrated solutions which are used in our plating operation. For example, we could use a conductivity cell to sense any spillages. The cell could activate a solenoid valve which would divert the flow to a holding basin. In this way, we would have automatic operation of a system which would prevent flows containing high concentrations of pollutants from entering the sewer. We propose that any system such as this which we would use would be presented to you for your approval before installation. If there are any additional steps which you would like to see put into effect to further insure the prevention of accidental spillages, we would, of course, consider them.

We believe that our request for permission to enter the sewer is reasonable when proper precautions are taken to prevent spillages. If additional explanation of our proposal is required, we will be happy to meet with you to give you a more detailed description of our intentions. Your cooperation in this matter is solicited and will be greatly appreciated.

Sincerely yours,



William J. Katz, Ph.D.
Technical Director--Process

WJK:ps

cc: Mr. C. W. Klassen
SWB, Chicago
DuPage County Health Dept.
Mr. R. S. Esposito, Plant Manager
Shafer Bearing Division